

CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

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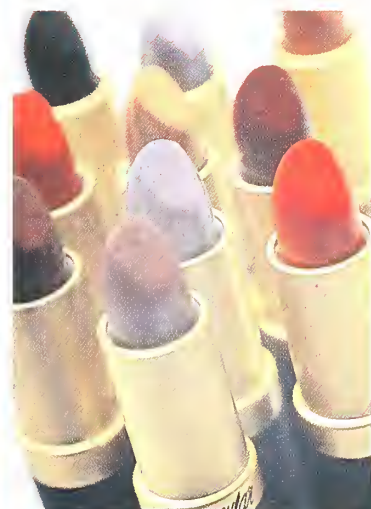
Strategy out by Christmas says Milburn

UK's first on-line pharmacy offers OTCs and private dispensing

PSNC says £8m lost from script switching 'unacceptable'

Pharmacy's role in nation's sexual health

BAPW talks to French firm to replace WSDS



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CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

VOLUME 252 No 6216 140th YEAR OF PUBLICATION ISSN 0009-3033

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COMMENT

It is ironic that the UK's first live internet pharmacy is the creation of an independent pharmacist from Leeds (see p5). Ironical because perceived wisdom is that independents are the group most vulnerable if (and it is a big 'if') internet medicine sales take off. Ironical, too, because Mr Lee has beaten the big battalions to the battlefield with a site that endeavours to set a professional standard in the absence of any guidelines from the Royal Pharmaceutical Society. Pharmacy2u will inevitably be followed by others, such as Chemistore (*C&D* October 23, p4), which may not have such a 'pharmacy sympathetic' origin. Before launching into a debate on the pros and cons of e-pharmacy, it is worth focusing on a few basic beliefs that have underpinned the profession's political stance in recent years. The first is that the network of community pharmacies is an important healthcare resource that needs to be maintained. The second is that face-to-face contact is an important element of the supply process in both OTC and prescription medicine sales. These are the planks on which the RPM case is being fought, and on which much of pharmaceutical care is based, and on which mail order medicine has been opposed. These principles have not been changed by the arrival of e-commerce, but could be totally undermined by it. Do pharmacists want to redefine the arguments about access, and whether or not medicines are ordinary items of commerce, merely to accommodate e-pharmacy? While no-one wants to be a Luddite, and attempting to impose a ban on internet medicine sales is a non-starter, resigned acceptance of sites like Pharmacy2u is not an option either. As we have stated before (*C&D* October 23, p3), codes of conduct to ensure consumer welfare and standards to reinforce the competence and integrity of the service provider are needed at the very least, and fast.

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Pharmaceutical company is trying to raise extra cash in the wake of recent setbacks

© Miller Freeman UK Ltd 1999
 Chemist & Druggist incorporating
 Retail Chemist, Pharmacy Update
 and Beauty Counter

Published Saturdays by
 Miller Freeman UK Ltd, Sovereign
 Way, Tonbridge, Kent TN9 1RW
 C&D on the internet at
 chemdrug@dolpharmacy.com
 Website: <http://www.dolpharmacy.com/>
 Subscriptions (Home): £133 per
 annum, (Overseas & Eire): \$314 per
 annum including postage
 £2.50 per copy (postage extra)
 Additional Price List: £75 per annum

Circulation and subscription
 Morlowe House, 109 Station Road,
 Sidcup, Kent DA15 7ET
 Tel: 0181 309 7000

Refunds on cancelled subscriptions
 will only be provided at the
 publisher's discretion, unless
 specifically guaranteed within the
 terms of subscription offer

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Ranshaw highlights Pharmacy's values

Pharmacies in Wales are "effective, efficient, equitable, accessible, acceptable and appropriate", Colin Ranshaw, chairman of the Royal Pharmaceutical Society's Welsh Executive, said at the Executive's annual dinner last week.

The ideas for NHS Direct and Walk in Centres were spawned in community pharmacies, he said. The 700 pharmacies in Wales have been practising these ideas for as long as he could remember.

Pharmacists are the nation's guardians of medicines. Almost 40 per cent of the Welsh Assembly's budget is spent on healthcare. And while about 12-13 per cent of this is spent on medicines, reducing drug costs alone does not necessarily reduce the overall healthcare costs, Mr Ranshaw said.

Pharmacy's future contribution to healthcare will focus on five main areas, he said. These are:

- the management of prescribed medicines and, for pharmacists themselves, prescribing in a broad range of circumstances
- the management of long-term conditions and the prescribing of repeat medications in the future
- management of common ailments
- the promotion of healthy lifestyles
- the provision of advice and support for other healthcare professionals.

Milburn promises pharmacy strategy by Christmas

Alan Milburn has promised that the long awaited pharmacy strategy paper will be published before Christmas - a year late.

The health secretary said in an interview for *Chemist & Druggist* that he does want to see a wider role for pharmacists as part of his agenda for breaking down barriers between the health professions.

"There is probably quite a lot we can do with pharmacists other than them doing their traditional role of handing out pills," he said. "The pharmacy strategy is coming up before Christmas."

He believes pharmacists, nurses and others are making better use of their skills, and are being able to apply them more effectively. The next step is to break down some of the demarcations that exist between some of these different occupational groups in the NHS, he said.

The health secretary is embarking on a comprehensive spending review of health for the period 2001-2004. He said the review was unlikely to look at new NHS charges, which had been ruled out by the last comprehensive spending review (CSR), but hinted it would look at anomalies over prescription charges.

"We want to see sustainable funding for the NHS. What I want to do for this ten year period is to demonstrate that the NHS is getting better and that it is changing to meet patients' needs. That means providing more money. This CSR does that," he said.

"As we invest, we have got to get a dividend back from the NHS in terms of change. This is not just money to keep the show on the road. It is money to modernise the services."

He emphasised the importance of securing change in order to secure more money from the Treasury. But he was adamant that a Labour Government could provide growth in NHS spending from taxes, and he rejected the Tory demands for more private healthcare.

On rationing, Mr Milburn also defended the inclusion of 'cost-effectiveness' in the terms of reference of the National Institute for Clinical Excellence.

The Government has been accused of "moving the goalposts" by Labour MPs after the introduction of an "affordability test" for the National Institute for Clinical Excellence.

Dr Phyllis Starkey (Labour, Milton Keynes) told the health minister John Denham that there had been assur-



Health secretary Alan Milburn

ances during the committee stage of the Health Bill which set up NICE that it would not check on the affordability of drugs on the NHS.

Yet an order had been laid before Parliament on August 6 which explicitly changed the constitution of NICE, amending it to allow the Institute to take into account the effective use of available resources.

The attack on NICE was launched a fortnight ago in a short Commons debate by the Liberal MP Dr Evan Harris, who warned that the introduction of the affordability test could lead to unacceptable rationing.



Left to right, Colin Ranshaw, chairman, RPSGB Welsh Executive; Geraint Davies, National Assembly member for Wales, and a pharmacist; Christine Glover, president, RPSGB

GMC to lose role in disciplinary shake up

A big question mark is hanging over the future of the General Medical Council after the announcement of sweeping new powers for health authorities to sack failing GPs.

The "tough new proposals" published last week by health secretary Alan Milburn amount to the biggest shake up in the NHS disciplinary machinery since 1948.

Ministerial sources confirmed that the NHS is effectively taking over the disciplinary role from the GMC. The

proposals, drawn up by chief medical officer Professor Liam Donaldson, mean that GPs:

- have to participate in clinical audit
- face annual appraisals of standards
- may be suspended by health authorities where there are serious concerns
- may be referred to new assessment centres where they will be looked at to see if they need retraining.

The NHS Tribunal, which has been criticised in the past as slow to take action, will itself be reviewed.

RPSGB highlights lack of control over internet medicine sales

The Royal Pharmaceutical Society wants international standards in place to control the sale of medicines over the internet.

E-commerce "offers clear benefits to the consumer but also [brings] problems that need to be urgently addressed", said Marshall Davies, vice-president of the Society at the inaugural meeting of the National Information Strategy Stakeholders' Conference. Mr Davies acknowledged that the internet is an uncontrolled worldwide market in which regulations are difficult, if not impossible, to enforce.

While the Government's view of medicines being sold in this way is unclear, it may not be entirely against the idea as costs are borne by the patient, said Mr Davies. Pharmacists will educate patients about the safe use of alternative markets, but the public needs to know that medicines sold over the internet are genuine and safe.

The current healthcare culture creates a necessity for pharmacists and GPs to be electronically linked, said Mr

Davies. Concern over patient confidentiality has subsided, said Mr Davies and pharmacists are now accepted as healthcare professionals who adhere to the ethics of confidentiality.

But opportunities for sharing electronic information are being "side tracked" by the issue of investment. The Society believes this investment must be centrally funded, but the Government believes it should come from a reduction in the processing costs of prescription reimbursement. This presents the profession and the Government with a 'Catch 22' dilemma, for which a way forward must be found.

IT will be central to information networks, which will lead to better decision making and patient care, said Mr Davies. "The Society would support a future where IT was seen as a means of improving both the supply of medicines and the tailoring of treatments to suit individual needs, not simply as a substitute for professional treatment and advice," he said.

UK's first virtual pharmacy goes on line from Leeds

The UK's first on-line pharmacy has gone live this week, offering internet users OTC medicines and the dispensing of private prescriptions.

It is the brainchild of a 30-year-old independent pharmacist from Leeds, who sits on the local pharmaceutical committee.

Daniel Lee is the managing director and one of the two pharmacists who own Pharmacy2u, whose web site is at www.pharmacy2u.co.uk.

Users are given the opportunity to buy from more than 10,000 products in five main product categories: medicines (including Pharmacy lines), healthcare, personal care, beauty and disability aids. Items selected are put in a 'basket', using what is becoming a standard internet shopping technique.

A pharmacy protocol developed by the company "will provide our pharmacists with information to assess whether the medicine is suitable for the customer".

Pharmacy2u also offers private prescription dispensing to those who open an account, and claims to provide "extremely competitive prices ... combined with a safe, secure and convenient way of having your prescription dispensed".

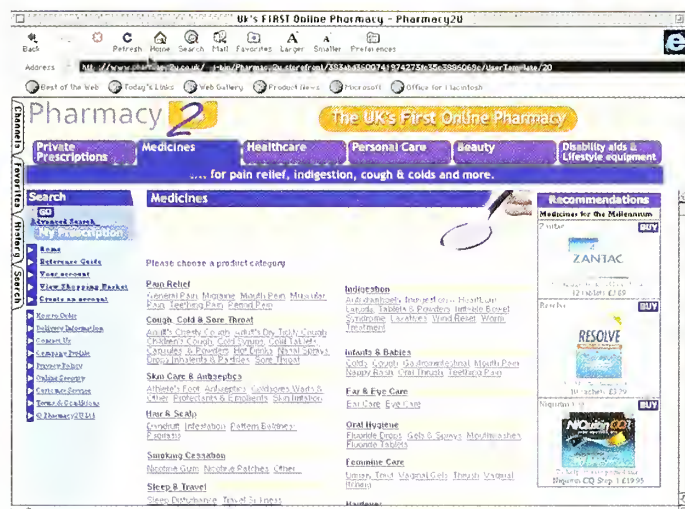
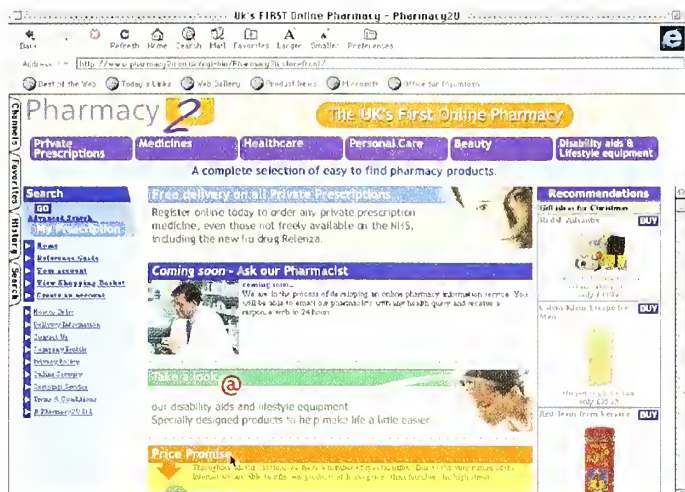
All orders for scripts or OTC medicines received before 11am will be delivered the next working day anywhere in the UK, says the web site. It adds that the RPSGB makes it clear that all deliveries must be undertaken by the company "and as such we are forced to levy an across the board charge of £5 for deliveries nationwide (although orders over £40 will be delivered free of charge)".

At present deliveries are to within mainland UK, but within six months Pharmacy2u expects to be delivering to all European countries.

The site hopes to "extend its services in the future to the interactive provision of advice on medicines and the supply of NHS prescriptions, once the UK regulations regarding electronic prescriptions catch up with those in the US".

Pharmacy2u is run from a registered pharmacy at Unit 4, Shaftsbury Parade, Harehills Lane, Leeds LS9 6PJ. The pharmacy is also a member of the National Pharmaceutical Association. It is run independently of the family business: product distribution is through a subsidiary company. Mr Lee said he had spent between £50,000 and £75,000 setting the company up.

A page on the web site sets out the company's vision for the future and its



Pharmacy2u offers OTC medicines and private dispensing

mission statement. Mr Lee said he wanted Pharmacy2u to be viewed by professional regulatory bodies as a "benchmark of how pharmaceutical services can be provided on the internet whilst upholding pharmaceutical law".

Feedback ...

While the Royal Pharmaceutical Society has not yet developed standards for UK-based pharmacy internet sites, it has received "quite a few inquiries" about the legal and ethical issues surrounding such ventures.

The head of the Society's professional standards department, Sue Sharpe, said: "I would be surprised if sales are being made in a pharmacy and orders are being despatched from a pharmacy, if there is a legal problem".

There may be issues about security and privacy of data, and the site will have to ensure it complies with advertising controls, she added.

"We would be more concerned

about the professional aspects of the service being provided. The Society will have to satisfy itself that the service is professionally acceptable. It will look into details of how patients are being screened and advised", she said.

The Code of Ethics currently says that medicines should not normally be supplied by mail order or by a third party carrier.

John D'Arcy, director of the National Pharmaceutical Association, said that while the NPA welcomes e-commerce for the benefits it brings, it believes medicines are special items of commerce.

"We believe there should be a ban on the supply of medicines by any 'arms length' route. We cannot condone what Pharmacy2u is doing".

The Association is looking for a long-term ban, which is in line with the position adopted by PGEU, the European Pharmacy Group.

Profile

Daniel Lee is a 30-year-old pharmacist who studied at Sunderland and did his pre-reg with Moss in London. He returned to Leeds seven years ago to help his father run the family business, Lee's Pharmacy (Rodney Lee Ltd), which has four pharmacies.

Mr Lee sits on the LPC and is a member of the PCG prescribing support group. He also has an MBA from Durham. He is managing director of Pharmacy2u and the major shareholder.

"We are looking for third party interest because of the expense of maintaining the site," he said. He wants partners who are prepared to take a stake in the company so that he can afford to promote it to the public. He said he is talking to big blue chip companies and venture capitalists.

Mr Lee is a firm supporter of international standards to control the supply of medicines over the internet. There should be guidelines and registration requirements for such sites, he believes, and said he would like to work with the Society to develop appropriate protocols.

He denied that internet supply of medicines fell into the same league as mail order, saying it is an interactive medium.

Mr Lee is aware that what he is doing may attract criticism, and acknowledges that the present regulations governing the sale of medicines on the internet are confusing.

He said he has tried to ensure that what he is doing is legal. He has sought advice from the Royal Pharmaceutical Society law department, the NPA and the Medicines Control Agency.

Although the MCA's legal opinion is that medicines cannot be sold over the internet, Mr Lee has received advice which challenges that. "It depends on where the transaction takes place," he said. He adds that he is prepared to go to court to support his position if required.

He is hoping that eventually he will be able to offer a service similar to that which *cornerdrugstore.com* is hoping to offer US independent community pharmacists (C&D November 6, p24). It has linked up with the US equivalent of the NPA, and its owners envision a national network of independent under its brand, driving customers to stores via internet activities.

PSNC asks PIPS to increase advance payment



LPC secretary Robert Gartside

The Pharmaceutical Services Negotiating Committee has asked the Prescription Information and Payment Service (PIPS) to look at ways of increasing Welsh contractors' advance payment to compensate for late payments.

Payments to contractors have been made on an estimated basis since July. PIPS is almost two months behind in its work and is losing ground at the rate of almost two weeks each month.

Many village chemists in North Wales do not feel they can carry on much longer, according to Robert Gartside, secretary of North Wales LPC. Mr Gartside wrote to Jane Hutt, health and social services secretary at the National Assembly for Wales, expressing concern over the problem.

Ms Hutt acknowledged there is a serious problem, but is "not hopeful of an early breakthrough". She said that the arrangements for paying contractors on estimates are being reviewed and she was due to discuss these with the Welsh Central Pharmaceutical Committee.

Mr Gartside and his LPC chairman were due to meet Jeanette Drew, head of PIPS, on Wednesday to discuss alternative prescription payment arrangements "in an attempt to get a more reasonable cash flow" for contractors.

Mr Gartside wants contractors to be informed of estimated payments mid-month, rather than at the end of the month. He is proposing a system where estimated payments are based on printouts from dispensary computers of that month's stock usage, rather than the last known value.

Mr Gartside said that PIPS may be eight to ten months behind on payments before the Category D problem is resolved, meaning that estimated payments will be based on out-of-date figures.

PSNC still fighting £8m script switching loss

The Pharmaceutical Services Negotiating Committee has told the NHS Executive that it cannot accept a loss of £8 million a year to contractors from prescription switching.

The problem - which involves the Prescription Pricing Authority deducting prescription charges from forms in contractors' charge exempt bundles - is still top of PSNC's negotiating list, chairman Wally Dove said on Monday.

But the NHSE is being unco-operative and is adamant that returning the relevant forms to contractors for retrospective endorsement would be unacceptable. The main reason given is the Fraud Investigation Unit's clampdown on fraud.

Mr Dove hopes that once problems with Category D have eased, the PPA will be more transparent over the numbers of prescriptions switched.

PSNC is seeking further legal advice and intends to pursue the matter at a higher level within the Department.

Contractors are being urged to tighten their procedures and check the back of the forms before sending them for pricing, not just when taking them from patients. On average, each pharmacy is losing about £800 a year.

Technician training While PSNC strongly supports community pharmacy technician training, it does not support registration by the Royal Pharma-

ceutical Society. Because the pharmacist is legally responsible for the dispensing of medicines and has a duty to ensure that dispensary staff are sufficiently trained, further regulatory controls are unnecessary, PSNC feels.

PCT pharmacy ownership The Secretary of State has yet to issue directions prohibiting PCTs from owning pharmacies. PSNC has already made representations to him and the matter has been raised in Parliament. Further representations are now being made to Lord Hunt, the new minister responsible for community pharmacy.

Negotiating team PSNC has selected its negotiating team. Elected members are Barry Andrews, Noel Bamber, Dhiren Bhatt, Hemant Patel and Allen Tweddie. Digby Emson is the Company Chemists' Association nominee, while *ex officio* members are Wally Dove, Steven Williams (PSNC vice chairman) and Phil Parry (Welsh Central Pharmaceutical Committee chairman).

Walk-in centres Doctors working in walk-in centres will prescribe on Form FP10 for dispensing in community pharmacies in England and Wales. The NHSE has confirmed that separate prescribing budgets will be allocated to doctors and nurses in these new centres, and the costs will not be translated back into the unified budgets of the patients' original GPs.

Wales office The WCPC will have a full time secretary, based in the new Cardiff office. Funded by PSNC, the WCPC has two representatives from each of the five LPCs in Wales, plus a chairman. Its constitution will be examined to ensure it can carry out its function as the body recognised by the Welsh Assembly to represent community pharmacy contractors' interests.

NHS Direct conference PSNC is organising a conference for LPCs on NHS Direct, in Milton Keynes, on December 6.

Zero discount retrospective for tacrolimus

The Department of Health has agreed to a retrospective discount adjustment for contractors who dispensed generically written scripts for tacrolimus capsules in March or April.

Contractors in England and Wales can lodge a claim by writing to the Pharmaceutical Advisory Services, Prescription Pricing Authority, Bridge House, 152 Pilgrim Street, Newcastle upon Tyne NE1 6SN or, in Wales, to the Practitioner Payments Board. They should give details including account number, dispensing month, prescriber's reference number, and name, number of prescription issued, capsule strength and quantity ordered.

Claims already lodged with the National Prescription Research Centre have been forwarded to the appropriate processing division. For more information contact the NPRC on 020 8441 8427.

● PSNC advises that the following lines have been added to Category D, but are not included in the November *Tariff* (in addition to the list in *C&D* last week, p5): ampicillin caps 250mg (500), ampicillin caps 500mg (250), pyridoxine tabs 50mg (28s and 500s).

● SPGC has added amoxycillin sachets 3g to the list of generics for which the PPD will accept pharmacists' endorsements of manufacturer/pack size in November.

For an up-to-date list of generics in short supply, visit www.dotpharmacy.com.

One-off pricing error by PPA

A blip in the Prescription Pricing Authority's processing system has led to 8 per cent of contractors in England being reimbursed the average prescription cost for the health authority this month, rather than their own average cost.

The mistake happened when the system reverted to using the health authority's figure. Usually this is used only for new contractors who have no established average, said Elizabeth Stobart, the PPA's director of operations.

Contractors need take no further action because the payments will be corrected in December, as the PPA can identify the contractors involved.

PSNC was alerted to the problem when a contractor complained that his figures looked wrong, but the PPA said it would cause further delays to rectify the problem immediately for all contractors. Pharmacists throughout the country have been affected.

The PPA has now finished processing prescriptions dispensed in August,

so the adjusted payments should be made to contractors on December 1. At the same time, contractors will receive an interim payment for prescriptions dispensed in October.

Elizabeth Stobart said on Tuesday that the PPA was doing everything possible to deal with the backlog, but the volume of category D prescriptions was still high. It was too early to predict when the situation would improve so that the advance payment could revert back from 100 per cent to 80 per cent. Traditionally, only about 1 per cent of items fall into category D; now there is about 15 per cent and it takes much longer to ensure that pharmacists are paid for what they supplied.

"Our priority was to ensure that contractors received a payment each month," she explained.

The PPA is recruiting more staff, encouraging overtime, trying to bring in trainees at an earlier stage and investigating whether the processing systems can be re-engineered.

Going gets tough

One of the big political themes of this year has been the proposed regulation of a doctor's ability to practise. This, it was believed, was to be organised through the General Medical Council and would demonstrate to the public that doctors could regulate themselves.

The rush to regulate professional standards took place after several high profile cases hit the headlines. So far so good, and though doctors might have been a little suspicious of some of the changes, they were being accepted.

Events have now started to move quickly and the latest developments will make GPs feel more threatened. The new moves originate from the Department of Health and herald a big shake-up in the powers of health authorities. The intention is to protect patients from poorly performing doctors. However, the proposals are potentially far-reaching.

GPs who are identified as poor performers are at risk of being instantly

"The threat of regulation is making the whole profession very uncomfortable indeed"

suspended by their HIA. Also GPs who are not up to standard could be referred to a new body, which would assess them and, if necessary, propose retraining, suspension or referral to the GMC.

But this is not just an exercise to weed out potentially dangerous doctors. Every GP will be under scrutiny. Every GP must submit themselves to an assessment every year (it is likely that this will be organised through their PCG or trust). In addition, GPs will have to provide proof that they are indeed capable of continuing to work. It will be compulsory for GPs to take part in an audit exercise.

It has also been proposed that GPs will have to carry with them information about their performance. This could list complaints, litigation and previous posts held. The Government says, though, that it does not want to conflict with the GMC's plans for revalidation and that the GMC will retain the right to strike off GPs.

The threat of regulation is making the whole profession very uncomfortable indeed. As the new millennium dawns many GPs, good as well as bad, will find the going that bit tougher.

Dr Harry Brown, a GP practising in Seacroft, Leeds.

Xrayser

Topical Reflections

Easy to condemn, but difficult to reverse once the damage done

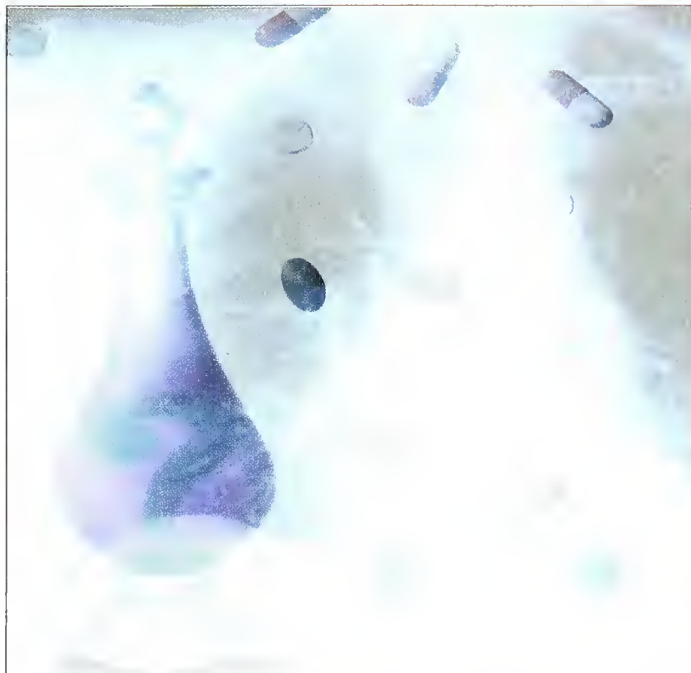
I still have to explain to customers why they can no longer buy terfenadine tablets over the counter or, indeed, why their doctors are not even prepared to prescribe them. A case of once bitten, always shy, with every request now being met by a shake of the head and a backward glance at the medical defence lawyers.

But terfenadine is not the only drug to have fallen from grace. Carbaryl is also now never used to treat head lice infestation, even when the problem has reached almost epidemic proportions, and aspirin in the under 12s has been taboo for years! Not that that has worried the French, who have never subscribed to the Reyes Syndrome theory and who continue to use aspirin in all age groups (*Medical Update C&D* November 20).

These were all effective OTC drugs, that were safe when used properly, but are now relegated to the pages of history. It is so easy to condemn, but when panic is proved to be unjustified, so difficult to reverse. I am still waiting for the statistical data to justify the restriction of sales of aspirin and paracetamol to packs of 32. I think the decision was ill conceived, and my customers agree!

Taking a holistic approach to the next millennium

One definition of a seminar is the meeting together of students for advanced study under the guidance of a tutor. I suspect that not all those participants at the *C&D* Seminar in Watford (*C&D* November 20, p19), entitled 'Millennial medicines', fell exactly into that category. However, the subject, that of herbal medicines,



is certainly worthy of further study, and the 'seminar' is a reminder that not only should we learn from the past, but that the practice of its lessons increasingly bear relevance today.

I well remember the disdain with which pharmacognosy was treated by most of my fellow university students, because, even those many years ago, allopathic drugs were in the ascendancy and the allure of the pharmaceutical industry was its promise to cure all by the next millennium.

Perhaps it is in the idea of 'cure' that in the last half of this century we have lost our pharmaceutical way. The equation of life cannot always be balanced by the certainty of scientific exactitudes. Sometimes equilibrium is best maintained by understanding how to maintain health and it is in this 'art' that pharmacy, historically excelled.

As I read through the presentations at the 'seminar' I was increasingly reminded that systematic drugs do not necessarily have all the answers. A discipline that has been successfully practised during the whole of the last millennium must still be valid, and even if most herbal medicines cannot be defined in terms of specific pharmacological activity, sufficient testimonial support exists for them to be as deserving of licensed recognition as their synthetic counterparts.

But it is not the customer who needs convincing. Customers confidently seek my advice and question me on the use of alternative therapies. They have already made the leap of faith. Now is the time for me to follow.

As a pharmacist I am in a unique position to guide my customers to the best treatment for their problems. Allopathic and alternative medicines should not be seen as competitors, but as complementary agents seeking the same end.

In future, when I am consulted in the pharmacy, I will still probably use modern drugs for the first-line treatment of defined acute conditions, but when I am consulted about more chronic conditions or where modern medicines have obviously failed, then I will willingly turn to the alternatives.

However, I would be the first to admit that I lack the detailed knowledge to confidently move towards recommending alternative therapies, and it is here that the 'seminar' shows the way. I was not personally able to benefit from the expert wisdom on show in Watford, but the *C&D* report provided me with a strong flavour of that experience. This should help to re-educate me to treat with more respect in the next millennium that which I have so underestimated in this one.

Rural dispensing deal comes a step closer

A trade-off to end the long running dispute with the medical profession over 'market town' dispensing by GPs and the 'Clothier loophole' is in sight.

Pharmacy negotiators and the doctors' General Practice Committee are expected to meet with health minister Lord Hunt in late December.

The two sides reached agreement on the issues some time ago, but have been waiting for an opportunity to put the deal before government. They were due to see John Denham at the end of October, but were frustrated by the Cabinet reshuffle.

PSNC chairman Wally Dove recently told the Dispensing Doctors' Association annual conference: "We have reached agreement on a package of changes to the legislation. They are detailed in nature, and have yet to be sanctioned by the Department.

"Even if we are not able to reach agreement with the minister, the effort has not been a waste of time - there is now a much closer understanding between the two organisations."

DoH figures on hospital vacancies are 'spurious'

Department of Health figures suggesting there is no recruitment crisis in hospital pharmacy are "spurious", according to Ron Pate, chairman of the Pharmaceutical Whitley Council staff side.

The recruitment problem in hospital pharmacy is no worse than it is in medicine and not as severe as it is in nursing, according to a DoH survey. The figures are for three-month vacancy rates measured in March. These are based on the number of vacancies that NHS trusts are actively trying to fill, which have been vacant for three months or more. The rate is the number of vacancies as a percentage of total posts, and is used to distinguish between normal staff turnover and vacancies that are difficult to fill.

The rate for pharmacy staff in England is 2.2 per cent, compared to 2.3 per cent for consultants and 2.6 per cent for qualified nursing, midwifery and health visiting staff. The

Whitley Council's own data suggests the pharmacy figure should be far higher. Mr Pate said it was "disappointing" that the figures grouped all pharmacy staff together, but separated medical and nursing disciplines. This distorts the data, he said. Mr Pate believes the recruitment problem is getting worse, but he is expecting official annual figures to be released shortly.

The rate of pharmacy vacancies varies significantly between health authorities. Areas such as Sunderland and Oxfordshire have no vacancies unfilled after three months, whereas the figure for Barnet is over 22 per cent.

Specialities with particular recruitment problems include dentistry, with a rate of 4.8 per cent, and psychiatry, with a 6.6 per cent rate. The national figure for operating theatre staff is 4.7 per cent, but is as high as 36 per cent in Wiltshire. Obstetrics and gynaecology has the lowest three-month vacan-

cy rate, at 0.4 per cent. Figures for district nurses and health visitors are 0.7 and 0.9 per cent respectively.

Mr Pate welcomed last week's pay settlement, of between 3 and 12 per cent for hospital pharmacists, as making some progress to alleviate the recruitment problem, but warned that problems with the pay structure have not been resolved. "While an award weighted towards lower grades will go some way to solving the recruitment problems, the overall effect is to erode the differential between grades and sap morale of senior staff," he said.

While Mr Pate is glad that the recruitment problem has been acknowledged, he is worried that nothing has been done to reward senior staff for their commitment. He warned that aspiring chief pharmacists will not want to launch a career in hospital pharmacy if the financial rewards are not there.

A joint statement on study leave from the staff and management sides of the Whitley council "should be out this week", said Mr Pate. The draft statement emphasises the importance of post-qualification training and continuing professional development throughout pharmacists' careers at all levels and encompassing all grades. It is identical to one issued for speech therapists a few years ago, said Mr Pate.

Palliative care project wins inaugural NPA/GHC award

The Inaugural National Pharmaceutical Association and Guild of Healthcare Pharmacists Award for joint primary and secondary care working has been won by a palliative care project in East Riding.

The award, sponsored by Merck Sharp & Dohme, is the first to be open to both primary and secondary care pharmaceutical projects. The winners received a grant of £5,000 to develop their integrated community pharmacy palliative care service.

Christine Glover, president of the Royal Pharmaceutical Society, presented Hilary Edmondson from Brocklehurst Chemists in Hull, and Sarah Scargill from Hull Royal Infirmary (collecting on behalf of Simon Gaines, hospice pharmacist at the Infirmary), with certificates for their work in a ceremony at the Society last week.

The aims of the project are:

- to establish a network of designated specialist palliative care community pharmacies
- to deliver multidisciplinary training on drug use in palliative care in PCGs
- to improve the quality of prescribing in community palliative care
- to promote pharmacy services to the primary care team, patients, and carers, to help them cope with medication issues.

The scheme will involve six community pharmacists in the East Riding Health Authority area working with Mr Gaines. Patients will be registered with a community pharmacist who will record and monitor prescriptions, and discuss issues with GPs and Macmillan nurses. The hospital pharmacist will act as a specialist information and advisory resource.

Mr Gaines will provide six training programmes for the community pharmacists and their primary care teams. He will audit availability of palliative

care drugs in the community and formalise the stock holding system for injectable drugs. Working with pharmaceutical advisers and GP palliative care facilitators (to be appointed), he will develop local palliative care formularies. A transportable display will explain how pharmacy services can assist patients and carers with medication issues.

The results will be presented at a symposium in a year's time. Next year's award winners will be announced at the same event.



Christine Glover (l), president of the Royal Pharmaceutical Society, presents Hilary Edmondson with her certificate for winning the joint NPA/GHP awards

Pharmacists prescribing head lice lotion in Sunderland

Pharmacists are prescribing head lice lotion and supplying detection combs in a scheme in Sunderland.

When patients approach the pharmacist for advice about head lice, they are supplied with a detection comb. If head lice are found, the pharmacist supplies two bottles of lotion that are free if the patient is exempt from prescription charges. The health authority reimburses pharmacists for their professional services and the cost of the lotion.

The Medical Entomology Centre in Cambridge provided training for pharmacists, nurses and GPs involved in the scheme. It has funding for 12 months, and there will be a preliminary evaluation after six months.



A linctus in a lozenge

Cough syrup may be effective, but it's not always practical is it? That's why New Strepsils Cough Lozenges have been developed. They bring relief to dry, tickly coughs, but are more practical than syrups because of their lozenge formulation.



With their ease of use and fast-acting relief, Strepsils Cough Lozenges are sure to represent a major new profit opportunity for your business. So for a practical cough medicine, make sure you recommend new Strepsils Cough Lozenges.

There is no better relief

Cough lozenge containing Dextromethorphan hydrobromide 2.5mg. **Indications:** For the relief of dry ticklish coughs. **Dosage:** Adults and children over 12 years: A lozenge should be sucked whenever the cough is troublesome. Not more than 10 lozenges should be taken in one day. Children 6 to 12: Not more than 2 lozenges within any 4 hours, and not more than 7 in any one day. Children under 6: Not recommended. The normal adult dose is still appropriate for the elderly. **Contraindications:** Hypersensitivity to any of the ingredients. Patients taking monoamine oxidase inhibitors or within 14

days of stopping such treatment. **Warnings & Precautions:** Do not exceed the stated dose. If symptoms do not go away, talk to your doctor. **Undesirable effects:** Occasional drowsiness, excitation, mental confusion and gastrointestinal disturbances. **Legal Classification:** P Licence. **Holder:** Crookes Healthcare Limited, Nottingham NG2 3AA. **Licence Number:** PL 00327/0124. **Price:** £2.49 for 24 lozenges. **Date of preparation:** July 1999.



**CROOKES
HEALTHCARE**

...but is it sugar free?

Think children's coughs, think Benylin. Benylin is Independent Pharmacy's only children's cough brand that is free from both sugar and artificial colours. What's more, they all come in pleasant fruit flavours with the added reassurance of childproof caps. Good reasons to think Benylin Children's Cough first.



Benylin

The name to think of first

Script specials

Brevoxyl formulation tackles acne



Brevoxyl cream is a new improved formulation of benzoyl peroxide for the treatment of acne from Stiefel.

It contains benzoyl peroxide 4 per cent in a patented hydrophase base. The formulation ensures that, rather than leaving crystals on the skin to cause 'hot spots' of irritation, the benzoyl peroxide is kept in solution as it is adsorbed. This minimises irritation and maximises the cream's potential to destroy *Propionibacterium acnes*, the main bacteria involved in acne.

The cream is suitable for mild to moderate acne and can be used alone or in combination with other topical or systemic treatments. A once- or twice-daily application is recommended.

Brevoxyl (40g, rrp £3.30) is a Pharmacy medicine and is prescribable. It is being launched to GPs initially, with plans to promote it over the counter next year. A pharmacy campaign will follow then.

Stiefel Laboratories (UK) Ltd.
Tel: 01628 524966.



IN BRIEF

Neo-Cortef out of stock

Dominion Pharma is anticipating that Neo-Cortef 1.5 per cent drops and ointment will be out of stock for at least three months from January. Manufacturer problems affecting one of the raw materials are to blame and Dominion is attempting to find an alternative source. A small emergency supply of the drops and ointment will be held for patients who cannot be prescribed an alternative.

Dominion Pharma.
Tel: 01428 661078.

Dyspamet tablets discontinued

SmithKline Beecham will be discontinuing Dyspamet Chewtab Tablets as soon as existing stocks with wholesalers are exhausted. Dyspamet Suspension 600ml will continue to be available.

SmithKline Beecham Pharmaceuticals. Tel: 01707 325111.

Novo Nordisk Pen redesigned

Novo Nordisk has redesigned its Preloaded Pen to make it easier for patients with visual or dexterity problems to use insulin. The Preloaded Pen's new features include colour coding and tactile markings. The pen can be used with the Novo Nordisk human insulins and NovoRapid.

Novo Nordisk Pharmaceuticals Ltd.
Tel: 01293 613555.

Hollister additions

Hollister has introduced a new range of leg bags (10 x 500ml, basic NHS price £25; 10 x 800ml, £25.09) and Night Bags (drainable 10 x 2,000ml, £11.20; non-drainable 10 x 2,000ml, £2.21) on the Drug Tariff. The leg bags feature fleece backing and, according to Hollister, the longest adjustable inlet tube available.

Hollister Ltd. Tel: 0118 989 5000.

Travel health consumer guides

A quick reference Travel Health Guide for consumers has been produced by RTFB Publishing priced £5.49 (incl p&p). The A-Z guide carries practical information on more than 30 travel-related health hazards and aims to help travellers avoid health problems while abroad. Health phrase books in French and Spanish have also been launched (£2.49 each incl p&p). Copies can be purchased from:

RTFB Publishing.
Tel: 01703 229041.

MEDICAL MATTERS

ABPI Compendium on the net

Pharmacists can now access the Summary of Product Characteristics of more than 2,500 licensed medicines on the internet.

The Electronic Medicines Compendium (eMC), launched by the Association of the British Pharmaceutical Industry and Datapharm Publications, can be accessed by registering at www.emc.vbn.net. The eMC

will form part of the Virtual Health Network. It will eventually encompass all officially approved SPCs.

The ABPI hopes to eventually include patient information leaflets for all licensed medicines. Future plans for eMC include incorporating the database in pharmacy and hospital information systems and on GP prescribing systems. The ABPI plans to make the

eMC available to the public in the New Year.

Stephen Mott, Datapharm's general manager, said: "Amid growing concerns about the quality of much of the health information on the internet, the eMC will provide a constantly updated, authoritative and trustworthy source of information about medicines licensed for use in the UK."

US doctors under pressure from DTC ads

Most doctors in the US feel pressured to prescribe drugs that have been advertised directly to patients, according to a paper presented at the annual meeting of the American Association of Pharmaceutical Scientists.

In phone interviews with 199 primary care physicians in Ohio and Pennsylvania, only 9 per cent said they felt no pressure to prescribe a drug requested by the patient, while 47 per cent said they felt a little pressure and 6 per cent felt a lot of pressure.

Benjamin Banahan and John Bentley, professor and assistant professor of pharmacy administration at the University of Mississippi, attempted to assess physicians' attitudes to direct-to-consumer advertising.

The doctors polled said that an average five patients a week asked them to prescribe a specific drug and 30 per cent of requests were fulfilled.

Doctors most frequently identified TV ads (77 per cent), print ads (51 per cent), TV news stories (49 per cent) and print news stories (48 per cent) as

sources that prompted patients to ask about the medicine. Over half the doctors thought the information in pre-

scription ads was only partially accurate while 42 per cent said it was mostly accurate.

Genetic marker for obesity found

Researchers in Australia have found a genetic marker which indicates virtually an absolute likelihood of obesity.

A variant of the glucocorticoid receptor gene has been associated with increased sensitivity to glucocorticoids, and this sensitivity is thought to predispose subjects to a rise in body mass index.

Researchers at the University of Sydney investigated the association between the gene variant and the overweight in non-diabetic white subjects of British descent.

Because of the interaction between hypertension and obesity, subjects were divided into two groups. Group 1 (n=195) were normotensive patients who had two normotensive parents. Group 2 (n=124) were people with

essential hypertension whose parents also had hypertension. Each group was then divided into two subgroups: lean and overweight.

All subjects then had to undergo a DNA test to identify the variant glucocorticoid receptor gene (Ser363). In subjects with BMI equal to or less than 25, the Ser363 gene was rare. However, the higher the BMI the more likely the subject was to have the variant.

The authors conclude that the Ser363 variant of the glucocorticoid receptor confers a virtually absolute likelihood of being overweight, unlike most other markers of being overweight which confer only a slight increase in likelihood. The authors suggest that the use of this marker could be important in clinical management.



Counterpoints



Herbal aid for the water system

Pharmadass is launching a new Healthaid herbal product formulated to help maintain the urinary system.

Healthaid Cysti-Care contains 200mg of cranberry extract to help combat urinary tract infections. It is also fortified with 208 per cent RDA of vitamin C to acidify urine,

producing an antibacterial effect.

Other ingredients are dandelion root powder, parsley powder, sage, *Uva ursi* (bearberry) extract, stinging nettle extract and buchu leaf extract.

A month's supply retails at £6.99.

Pharmadass Ltd.
Tel: 020 8991 0035.

Price savings for psoriasis sufferers



The licence for Exorex Lotion for the treatment of psoriasis has been transferred to the Forest

marketing the Exorex range since its UK launch last year.

From the beginning of December, Pharmax is halving the price of Exorex Cream (to rrp £6.49 for 100g, and £12.99 for 250g) and reducing the price of Exorex Leave-on Conditioner by over a third (to rrp £12.99).

Both the cream and the conditioner are moisturisers that can be used after treatment with Exorex lotion to help prevent the skin from becoming dry.

Pharmax Ltd.
Tel: 01322 550550.

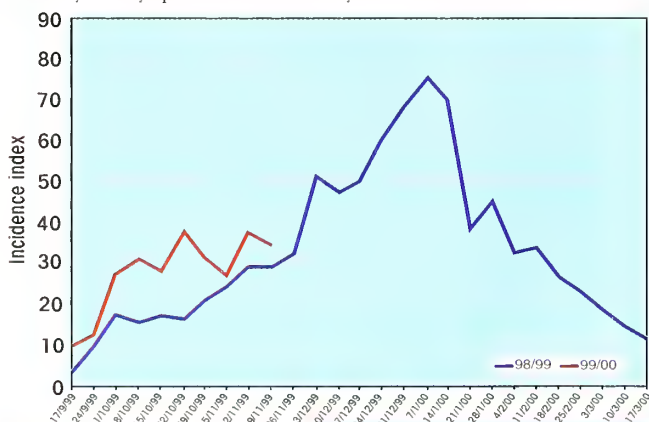
Laboratories Europe group.

Pharmax, a division of Forest Laboratories Europe, has been

Cough, cold & flu FORECAST

Information updated weekly by SDI

Norwich is the first area of the UK to move to 'Alert' status this year, indicating a severe measured increase in the incidence of coughs and colds, and a peak of respiratory illness. All other parts of the country are now on 'Pre-alert' except for Newcastle, which remains on 'Advisory'. Birmingham, Manchester, Glasgow and London move to 'Pre-alert' for the first time, suggesting a move to 'Alert' will follow in three to five weeks. Bristol has been on 'Pre-alert' for five weeks, and Leeds for four weeks. Coughs (57 per cent) and chest congestion (47 per cent) are the most commonly cited symptoms. It could be a busy Christmas on the medicines counter!



SPONSORED BY



MARKET STATUS

PRE-ALERT

Making child's play of product selection

Novartis Consumer Health is introducing a modern new look for its Tixylix children's cough and cold brand.

The new packaging features a distinctive new brand identity and new colour coding to help ease product selection.

Contemporary new illustrations on the packs depict children involved in activities that can be restricted by cough and cold symptoms.

Designed to increase on-shelf impact, the company says the new look helps ensure that important information is not obscured by trays or shelf strips.

Tixylix and Tixymol are being supported by a £2 million winter advertising campaign including TV support and press advertising in parental magazines until March 2000.

Novartis Consumer Health.
Tel: 01403 210211.



Estroven launches joint health products

Estroven has introduced a range of supplements containing glucosamine and chondroitin for joint health.

The range offers a choice of formulations and ensures a high daily intake of the two active ingredients, also referred to as proteoglycans.

Glucosamine and Chondroitin High Strength Orange Drink Mix (30 sachets, £19.45) comes as one-a-day sachets each containing glucosamine 1,500mg and chondroitin 1,200mg. The contents of one sachet should be dissolved in 250ml water to produce a pleasant tasting sugar- and starch-free drink.

Glucosamine and Chondroitin High Strength Capsules (60, £19.99) contain glucosamine 500mg and chondroitin 400mg. The

recommended dose is one capsule three times a day.

The third product in the range is Glucosamine Plus Curcumin and Ginger Caplets (60, £14.99), each containing 425mg glucosamine, standardised curcumin extract 300mg and standardised ginger extract 25mg. The recommended dose is two caplets twice daily.

Glucosamine and chondroitin are found naturally in joints where they help to maintain mobility and flexibility.

Curcumin has antioxidant properties and is thought to be involved in blocking the inflammatory mechanism. Ginger is also thought to have a role in healthy circulation.

Estroven Ltd.
Tel: 01803 665678.

WE'RE RIGHT BEHIND YOU



Covonia is, and always has been, fully committed to pharmacy. Over the past year our new Night Time and Expectorant formulas combined with our highly impactful advertising have brought even more customers "charging" into pharmacies to buy Covonia. So, when it comes to cough medicine you can be sure we're behind you all the way...

Ask your Thornton & Ross representative about the special Bully Bonus Deals!

COUGH MEDICINE WITH CLOUT

Thornton + Ross

Linthwaite, Huddersfield HD7 5QH Tel: 01484 842217

Mavala unit is at your fingertips

Mavala is introducing a versatile new display unit for its nail, hand and footcare products.

The Mavala 2000 stand is designed to be flexible for retailers, offering a tailored display solution.

The stylish unit provides a clear product layout to make self-selection easier for the consumer.

Mavala UK Ltd.
Tel: 01732 459412.



New consumer panel to measure beauty purchases

Marketing information group Taylor Nelson Sofres has introduced a new consumer panel to measure purchases of colour cosmetics, fragrances, selective skincare and gift packs in Britain.

Beauty Panel records the purchasing patterns of a panel of 5,000 males and 5,000 females aged 11 to 74 by using a pre-arranged telephone interview every fortnight. When the data is grossed up, the sample is representative of the British population.

In addition to reporting on market, sector and brand values, the new panel delivers information on actual buying behaviour, such as how often purchasing occurs, how much is spent, what shops the money is spent in and by whom.

Tim Nancholas, director of Beauty Panel, says: "Beauty Panel gives manufacturers the power to position brands more effectively and enables them to gain, or maintain, a competitive edge in the marketplace." **Taylor Nelson Sofres plc.**
Tel: 020 8967 0007.

Tea tree oil range for top to toe hygiene

Brand Managers has launched a new tea tree oil product range for the body and hair.

All the products in the Tea Tree Plus range contain highly concentrated tea tree oil - a natural antiseptic that helps kill germs, bacteria and fungi responsible for skin irritation. Other ingredients are natural oils and fruit and plant extracts.

The range includes Pure Tea Tree Oil, Daily Facial Wash, Refreshing Toner, Top to Toe Moisturiser, Daily Treatment Shampoo, Daily Treatment Conditioner, Intensive Treatment Shampoo, Intensive Treatment Conditioner and Hand Wash.

Packaging is in green aluminium cans that protect the qualities of the



essential oil. With the exception of Refreshing Toner, the products feature a convenient pump to help ensure a measured dose. Refreshing Toner has a dispensing cap for direct application onto a cotton pad.

All the products retail at £3.99.
Brand Managers Ltd.
Tel: 020 8286 6688.

ON TV NEXT WEEK

Askit: STV, C4 (Scot), C5 (Scot), GMTV (Scot)

Beechams: U

Beechams Flu Plus: All areas except U, CTV, C4, GMTV

Calpol: All areas except U

Gaviscon Advance Liquid Sachets: All areas except CTV, GMTV, TSW, plus C5

Lemsip Cold and Flu Max Strength: All areas except CTV, GMTV, TSW, plus C5

Lemsip Sore Throat antibacterial lozenge: All areas except CTV, GMTV, TSW, plus C5

Nytol: All areas except C

Sensodyne toothpaste: All areas

Settlers: All areas except C

Solpadeine: U

Tixylit: B, G, Y, C, M, CAR, TT, C4, GMTV, Sat

Zantac 75: C4, C5, ITV, Sat

Zovirax: LWT, ITV, C4, C5, Sat

A Anglia, **B** Border, **C** Central, **C4** Channel 4, **C5** Channel 5, **CAR** Carlton, **CTV** Channel Islands, **G** Granada, **GMTV** Breakfast Television, **GTV** Grampian, **HTV** Wales & West, **LWT** London Weekend, **M** Meridian, **Sat** Satellite, **STV** Scotland (central), **TT** Tyne Tees, **U** Ulster, **W** Westcountry, **Y** Yorkshire

NICOTINELL® MINT 1mg LOZEN

Presentation: Nicotine lozenge contain

1mg nicotine, with o mint flav

Indications: Treatment of nicotine dep

ence, as an aid to smoking cessation. **Dos**

and Administration: Stop smoking c

pletely when starting treatment. Suck

lozenge when the user feels the urge to sm

Normally, 8-12 lozenges per day, up to o

imum of 25 lozenges per day.

3 months, the user should gradually

down the number of lozenges sucked. /

acid drinks 15 minutes before sucking

lozenge. **Contra-indications:** Non smo

occasional smokers, people under 18 y

As with smoking, Nicotinell is contra-indi

during acute myocardial infarction, uns

or worsening angina pectoris, severe co

orrhythmias, recent cerebrovascular acc

pregnancy and breast feeding. **Precaut**

Hypertension, stable angina pectoris,

brovascular disease, occlusive peripheral

riol disease, heart failure, hyperthyro

diabetes mellitus, renal or hepatic impair

peptic ulcer or gastric irritation. Keep out

reach of children at all times. **Side ef**

Smoking cessation causes many witho

symptoms. Events which may be relat

smoking cessation include headache,

disturbances and gastro-intestinal distur

May cause throat irritation, hiccuping,

indigestion or heartburn. **Interact**

Smoking may increase the metabolis

some medicines. The dosage of these

cines may require re-tailoring on smokin

sition. **Legal Category:** P. Retail Price

Product Licence No: (PL 0030/014

packs of 12 £2.99, packs of 36 £7.4

packs of 96 £15.99. **PL Holder:** N

Consumer Health, Wimbleshurst

Horsham, West Sussex, RH12

Date of Preparation: August 1999.

FEEL



FREE

TO MAKE A MINT WITH NICOTINELL'S BRAND NEW SUGAR-FREE LOZENGE

New, unique and innovative sugar-free alternative for quitting without chewing.

1st lozenge format equivalent to 2mg of gum.

Nicotinell is dedicated to continue the growth of the pharmacy
smoking cessation market.

£5 million heavyweight advertising campaign.

The
Nicotinell[®]
Stop Smoking Programme

Helps your customers set themselves free from smoking

For further information contact Novartis Consumer Health on 01403 323953

www.nicotinell.co.uk

NEW
LOZENGE



Lower prices for blood pressure monitors

A&D Medical has reduced the retail prices of its two most popular blood pressure monitors.

The UA-767 upper arm monitor has been reduced from £89.99 to £79.99. The UB-322 wrist monitor will now retail for £79.99 instead of £99.99.

Both products are supported with consumer leaflets that highlight the need for BP monitoring and the ease of operation of these products.

The company also offers a free 'Managing hypertension' video to pharmacists.

A&D Medical.
Tel: 01235 550420.

Bassett's vitamins bounce back onto TV

Ernest Jackson plans to support its Bassett's Soft & Chewy range of vitamins with a £500,000 TV campaign at the beginning of next year.

The breakfast time advertising will focus on the message

Konica to launch new APS film

Konica plans to launch a new Advanced Photo System film in January 2000.

Konica Colour Centuria APS 200 and 400 will be available in 15, 25 and 40 exposures.

The film is designed to deliver sharper, finer details with realistic colour reproduction and wider exposure latitude.

Konica says the wider exposure latitude means that scenes can be vividly captured regardless of brightness. It also reduces the number of 'failed' shots - especially in the case of back-lit scenes.

Retail prices have not yet been announced.

Konica (UK) Ltd.
Tel: 020 8751 6121.

SB offers graphic advice about colds and flu

SmithKline Beecham is supporting its Beechams brand with a new £4 million TV advertising campaign that uses graphics to illustrate the symptoms of colds and flu.

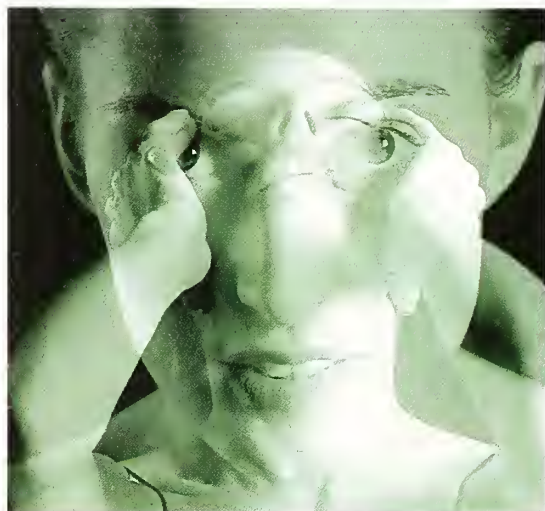
Sheets of ice crystals are used to illustrate shivers, and rock fragments symbolise headaches in the

campaign that will be on air until the middle of February.

Although the commercials focus on Beechams' Flu-Plus, which is indicated for heavier colds and flu, the campaign will also benefit the entire Beechams' range.

The company is also sponsoring the Beechams' Cold and Flu Scale on the GMTV weather slot. This new monitoring system gives the public information about cold and flu levels.

SmithKline Beecham Consumer Healthcare.
Tel: 020 8560 5151.



This treatment deals with the irritating effects of stubborn dandruff.

The Polytar part of Polytar AF has long been trusted to treat itchy, flaky scalp conditions.



Polytar AF. Prescribing Information: Presentation: Polytar AF is a medicated scalp treatment containing the following active ingredients: Tar blend 1% w/w and Zinc pyrithione 1% w/w in a shampoo base. **Uses:** For the topical treatment of scalp disorders such as dandruff, seborrhoeic dermatitis and psoriasis. **Dosage and administration:** Shake the bottle before use. Wet the hair

and massage Polytar AF into the hair, scalp and surrounding skin. Leave for 2-3 minutes, then rinse thoroughly. Use three times weekly for at least 3 weeks or until the condition clears. Prophylaxis for seborrhoeic dermatitis and dandruff: use weekly. **Contra-indications:** Polytar AF should not be used by patients with known hypersensitivity to any

Philips throws light on the new millennium

Philips is running a torch and battery promotion designed to maximise on sales for the new millennium.

An eye-catching, two feet high, millennium-themed counter top display unit folds out to sit on the counter.

Each unit holds three torch models - Philips aluminium torch, rubber torch and a millennium themed pocket light. There are a total of 12 torches in each unit.

Each unit also houses Philips high performance Powerlife AA batteries.

The products carry an instant win consumer promotion - every scratch card and match gamecard is a winner.

Philips.
020 8781 8257.

Tiger on the web

Haw Par Healthcare is launching a web site for its Tiger Balm natural topical analgesic. The site at www.tigerbalm.co.uk will offer the latest product information, a history of Tiger Balm and an account of the brand's conservation efforts.

LRC Products Ltd.
Tel: 01992 451111.

New millennium boost for Diflucan One

Pfizer Consumer Healthcare is investing £750,000 in a new millennium TV campaign for its Diflucan One oral treatment for vaginal thrush.



The campaign will feature a repeat of the successful 'restaurant' commercial that was recently voted 'Best TV ad' by TNS Pharmacy Viewpoint.

The advert features a young woman taking Diflucan One with a glass of water in a restaurant. It targets women aged 20-44 years, when the likelihood of suffering from thrush is highest.

The campaign will run in January on ITV, Channel 4, Channel 5, Satellite and Cable.
Pfizer Consumer Healthcare.
Tel: 01420 84801.

Duracell adds power to Christmas sales

Duracell is supporting its Duracell Ultra alkaline battery with a £2.5 million TV campaign running until the middle of January.



The new 'This is power' campaign is designed to maximise consumer purchases of high-tech appliances at Christmas.

The commercial uses sharp imagery to show the battery forming out of a train emerging from a tunnel. The battery is then seen powering a variety of high drain appliances.

The campaign is being aired on all national terrestrial and Sky stations.

Duracell (UK) Ltd.
Tel: 020 8560 1234.

Kira product voted supplement winner



Kira St John's Wort has been voted 'Best Supplement of the Year' in the 1999 'Zest for Life Awards' run by Zest magazine.

The product was recognised by the judges to have made the most significant contribution to the improvement of the emotional wellbeing of women today.

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Quantity: Polytar AF is available in bottles of 150ml. Basic NHS Price: 150ml £4.40. Product Licence number: 0174/0071.

Product Licence Holder: Stiefel Laboratories (UK) Ltd, Holspur Lane, Woodburn Green, High Wycombe, Bucks. HP10 0AU. Full Prescribing Information is available from: Stiefel Laboratories (UK) Ltd, Holspur Lane, Woodburn Green, High Wycombe, Bucks. HP10 0AU. Polytar AF is a registered Trademark. © 1999 Stiefel Laboratories (UK) Ltd



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Questions

- 1 Would the endorsement 90/60 be accepted?
- 2 Could Broken Bulk have been claimed?

Answers

- 1 No. Persantin Retard is a special container so only 1 x 60 would be reimbursed.
- 2 No. Broken Bulk cannot be claimed on special containers.

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Age if under
12 years

yrs. mths.

Address

Pharmacy Stamp

Pharmacist's pack & quantity endorsement	No. of days treatment N.B. Ensure dose is stated		NP
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90 60	Mitte 90		
Signature of Doctor		Date	

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RESCRIBING INFORMATION FOR STREFEN™

Strefen™ Lozenges contain Flurbiprofen BP 8.75 mg per lozenge. **Indication:** Symptomatic relief of sore throat. **Dosage and administration:** Adults and children over 12 years: one lozenge sucked slowly every 3–6 hours as required, up to a maximum of 5 lozenges in 24 hours, and for a maximum of three days. The lozenges should be moved around the mouth whilst sucking. **Contraindications:** Hypersensitivity to any of the ingredients; in patients with existing, or history of, peptic ulceration; history of bronchospasm, rhinitis or urticaria associated with aspirin or NSAIDs. **Special warnings and precautions for use:** Bronchospasm may be precipitated in patients with history of bronchial asthma. Caution is required in patients with renal, cardiac or hepatic impairment as renal function may deteriorate with use of NSAIDs; patients with hypertension; patients with abnormal bleeding potential as bleeding time can be prolonged. **Pregnancy and lactation:** Use of Strefen™ should be avoided in the third trimester.

Flurbiprofen appears in breast milk in very low concentrations and is unlikely to affect the breast-fed infant adversely. **Undesirable effects:** Dyspepsia, nausea, vomiting, gastrointestinal haemorrhage, diarrhoea, mouth ulcers, fluid retention and oedema. Exacerbation of peptic ulceration and perforation, urticaria, angioedema and various rashes have been reported. Very rarely, jaundice and thrombocytopenia (usually reversible), aplastic anaemia, and agranulocytosis have been reported. Transient local irritation of the buccal mucosa may occur, and taste perversion has been reported in trials. **Package quantities:** Strefen™ is available in cartons of 16 lozenges. **Basic NHS cost:** £2.00. **Product licence number:** 00327/0097. **Product Licence Holder:** Crookes Healthcare Ltd., Nottingham NG2 3AA. **Legal category:** POM. **Date of preparation:** September 1999. **References:** 1. Benrimoj SJ, Langford JH, Homan HD, Christian J, Charlesworth A, Steans A. Efficacy and safety of the anti-inflammatory throat lozenge flurbiprofen 8.75 mg in the treatment of sore throat. Poster

presented at the 2nd European Congress of Pharmacology, Budapest, Hungary, 3–7 July 1999. 2. Watson N, Nimmo WS, Christian J, Charlesworth A. Efficacy and safety of flurbiprofen 8.75 mg lozenges in the treatment of sore throat resulting from upper respiratory tract infection. Poster to be presented at the 28th Annual Meeting of the American College of Clinical Pharmacology, Rockville, MD, USA, 16–18 September 1999. 3. A randomised, double-blind, parallel group, placebo-controlled, multiple dose investigation of the safety and efficacy of 8.75 mg flurbiprofen lozenges in the symptomatic treatment of sore throat. Data on File, Boots Healthcare International 1998. 4. Strefen™ Summary of Product Characteristics. Crookes Healthcare Limited 1999. 5. Dollery C. Therapeutic Drugs (2nd Edition) 1999. Churchill Livingstone, Edinburgh. 6. Christian J, Largey PM, Shaw H, Charlesworth A, Richens A. Local and general tolerability of flurbiprofen lozenges in healthy volunteers. Poster presented at XXIX National Congress of the Italian Society of Pharmacology, Florence, Italy, 20–23 June 1999.

As we near the 21st century, colour rules no longer apply in the world of cosmetics, as Sarah Purcell reports

Millennium mania

New Year 2000 is the biggest excuse ever to get glammed up and go partying, and the cosmetics industry has been gearing itself up for this huge opportunity for months. Take a look at the new collection for virtually every brand and you'll find glitter, shimmer and shine.

But this time it's not just for young clubbers - thanks to new technology the fun colours and glittery textures can be worn by women of all ages. And as with fashion, the old rules have gone out of the window - you can now wear whatever colour you like no matter what your skin tone or eye colour, as long as you pick a shade and texture that works for you.

What's hot this winter?

It goes without saying that the dawn of 2000 will bring a rush of futuristic looks, and make-up is no exception. Metallic shades, glitter and lots of shine are key looks. "Silver and gold shades are very much in vogue, with glitter and pearlised textures," says Caroline Donnelly, make-up artist at Miners. "I think for the New Year we'll see lots more bronzes and golds, which can be dressed down for a more natural daytime look too. As for texture, skin still has that sheer, shiny look and we'll see lots of cosmetics with iridescent finishes," she says.

The other main trend is bold berry shades like plum and rich purple, especially for lips and nails, to tone with the opulent colours and rich fabrics of this winter's clothes.

At Christian Dior, public relations manager Sophie Peter says that understated elegance is what we'll be seeing as we moving into the next century. "The look is glamorous, but not the kind of brash glamour we saw in the 1980s. It's much more subtle this time. We'll see lots of nude browns, greys and camels to reflect the cashmere blends seen on the catwalks," she says.

At Bourjois, make-up artist Daniel Sandler says smoky eyes are big news. "Using either charcoal shades or warm browns and golds to contour the eye, then adding a dash of a bright colour like peacock blue to add real drama." For lips, we've moved away



Cosmetics on the internet

So will we all be buying the latest lipstick shade on the internet rather than the High Street in the next century? A new poll carried out by MORI found that three-quarters of consumers will only ever buy their toiletries from a shop, while for cosmetics three-quarters would prefer to see products displayed in-store as trying out different colours and textures was all part of the pleasurable shopping experience

from the neat, contrived look. "Lips are stained with purple or red, rubbed on with a finger rather than straight from the tube. Then apply sparkling or sheer gloss over the top," says Daniel Sandler. "Lip liners aren't being used much at the moment as they give too contrived a look."

For foundations, the look to achieve is still dewy, fresh and transparent - no return to a matte finish just yet. "Women don't want to look too made up just because they're wearing foundation," says Mr Sandler.

Body make-up

When pop stars like Madonna were seen sporting henna tattoos, a trend for body make-up quickly took off. As well as ranges of temporary tattoos, many ranges now include shimmering body powder, pearlised body cream and glittery body gel. Luckily, textures have moved on since glitter was last popular in the 1970s, and the look is much more subtle and easy to wear.

Brand new for this winter is a range of make-up which is only visible under ultra-violet light. Called Lumiere Noire, the range from Christian Dior comprises four



Max Factor Gold

products - white liner for eyes, transparent pencil for body and clothes, hair mascara and nail enamel in gold or silver.

Nails take centre stage

Since colours for nails became funky and bold, nails have become an important part of creating a look. "Nails are now a fashion statement in themselves," says Annette Close, professional development manager at Mavala. "And while manicures were

once the preserve of ladies who lunch, it's now much more mainstream. And while I'm not sure we'll ever go as far as the Americans, where a manicure is part of the weekly routine, it'll certainly become more popular both for women and men."

This winter, look out for an exciting mix of shades, from apricot and banana tones and smudgy khakis for daytime, to reds, plums, metallics and glittery colours for night. "Older

Market value

Total colour cosmetics: £276.14m
Face make-up: £109.8m
Lip make-up: £66.1m
Eye make-up: £64m
Nails: £36m

(Taylors Nelson Sofres Beauty Panel Aug 1999)

Who wears what?

According to Mintel research, 82 per cent of women wear lipstick, 63 per cent wear eye make-up and 56 per cent foundation. Young women are still the heaviest users of all types of make-up, with 86 per cent of 15-19-year-olds wearing lipstick and 68 per cent using foundation. Women who work full-time are most likely to wear make-up.

With colour cosmetics, most women switch from brand to brand, trying out new shades and textures. However, with foundation, women are more likely to find a colour and formulation that suits them and stick with it, says Mintel.

Hypo-allergenic products are still important, and 28 per cent of women cite this as a reason for buying one brand rather than another.

women are becoming much more adventurous with nail polish - only a few years ago you'd never have seen an older woman wearing glitter nail polish, but now that formulations are so much better it's quite acceptable," says Annette Close.

At Bourjois, Daniel Sandler says the French manicure has been given a fresh look, painting the moon of the nail in a colour such as red and the tips in a contrasting shade. Extra long nails are out, he says, and women tend to wear stronger colours on toes than fingers. "We'll see lots of golds and glitter for those millennium parties, and body piercing has extended to nails too, with small rings through the nail becoming popular."

Nails are one area where new technology has inspired huge interest, in particular the quick drying and peel off formulations. "We've also seen improved base and top coats which prolong the life of nail polish, and nailcare products enriched with vitamins to care for nails, too."

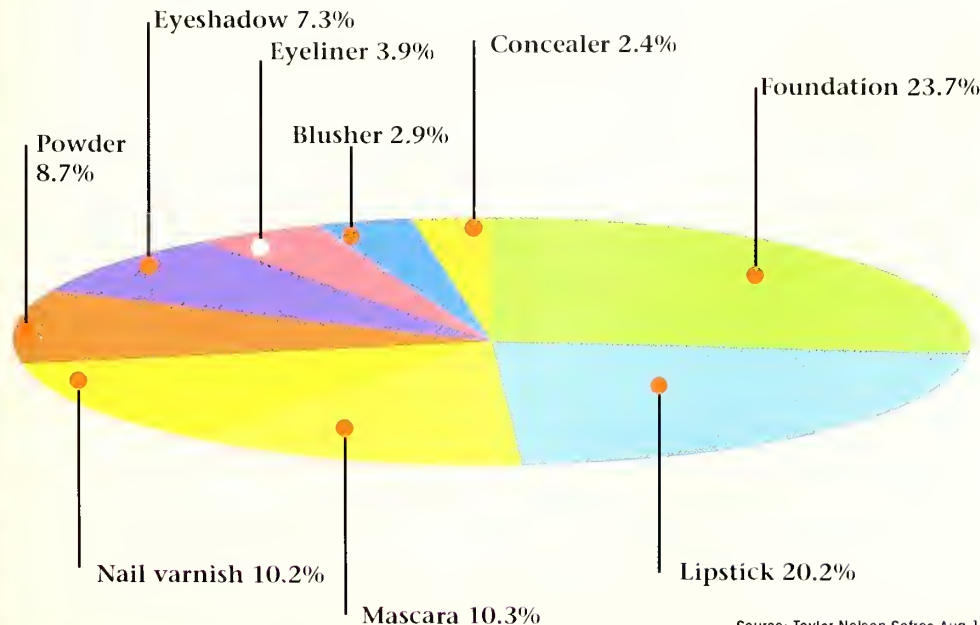
We asked Mavala for their top five selling nail colours. They are:

- Violette - parma violet shade
- Rose The - pearlised white with a hint of red
- St Tropez - pearly bronze
- Glasgow - lilac pearl
- Arosa - baby pink gloss.

We have the technology

Cosmetics are moving into the next century thanks to new technology.

Market Share



Source: Taylors Nelson Sofres Aug 1999

Continued on P22 →

THE FUTURE FOR... New technology - definitely here to stay



At this year's British Pharmaceutical Conference, the profession was given an opportunity to see the first commercial applications of a touch screen computer package. It is clear that there are mixed feelings about the apparent invasion of different forms of communication between our customers and us. I am firmly convinced, however, that there will never be any substitute for the one to one personal contacts that people expect from healthcare professionals. New technology simply assists us in our routine tasks and will never replace us. We need to embrace the new electronic methods of information transfer and harness them to suit our daily professional roles, while ensuring confidentiality and reliability.

The NHS net will soon link every doctor's surgery in the land with a central database for patient record transfer and secure information exchange. There are also plans to put individual medical records onto a smart card that patients can carry around with them and allow them to transfer that information to any other healthcare professional they choose.

The current system of writing a prescription onto an FP10 is bound to disappear as the secure electronic transfer of drug details and diagnosis can already be achieved in principle. We are not too far away from the day when patients select at the surgery the pharmacy they wish to have their prescription details emailed or "electronically transferred". This progress must be embraced, not shunned.

Andrew McCoig

Strepsils

approachable throatcare expertise

→ Continued from P21

Eyeshadows and blushers in particular have benefited from technology that enables finer milling and grinding of pigments, which means you get better colour using less product. Powders are treated with silica to give a softer, smoother feel and a longer lasting result.

"I think longer lasting eyeshadows will be the next big thing," says Daniel Sandler. "Shadows will deliver a fine wash of colour which stays put, but leaves the skin still visible underneath so it doesn't look unnatural."

At Dior, Sophie Peter agrees: "Our new eyeshadows will come in a cream to powder format, using fine particles of colour which melt into the skin, giving a veil of colour rather than a solid effect." The new Dior blushers, she says, deliver the merest whisper of colour because they are tale- and oil-free. "And while it's a natural look that you achieve, it's still a far cry from a nude face."

At Miners, technical manager David Williams says that cosmetics that offer UV protection may become increasingly popular in the future, both to protect the skin from ageing and from the harmful effects of the sun. The use of antioxidant vitamins such as C and E has been popular in skincare products, and we may see this being extended into cosmetics in the future, he believes. "Extra benefits from the dual function cosmetic may be the edge which will persuade a consumer to buy one brand rather than another," he says.

Daniel Sandler says that extra benefits included in cosmetics are the way forward for the new cosmetics. "The next decade is going to be all about taking care of yourself - and if you feel better, you look better too."

Taste for adventure

A more adventurous consumer is certain to have an effect on the kind of cosmetics we'll be wearing in the next century. "There used to be lots of rules about who could wear which colours. For example, redheads were told they should never wear pink. But all that has gone now, and basically you can wear any colour you like, as long as the shade you pick suits your skin tone," says Caroline Donnelly at Miners.

The market

Since the demise of the natural look in the mid-1990s and a with renewed interest in colour, the cosmetics market has seen increased sales thanks to new product launches and women wearing more make-up again. Between 1993 and 1997 the market increased by 18 per cent, according to Mintel, and is now worth



Bourjois: for the body, face and hair



Mavala's Ananas and Abricot

£276.1 million (Taylor Nelson Sofres, August 1999).

The increasing influence of the fashion catwalk has also fuelled growth, with trends filtering through to mainstream brands in a matter of months.

New brands launched by celebrity

Distribution trends

Pharmacy and drugstores	51.1%
Department stores	17.9%
Multiples	3.9%
Others	27.1%

(Taylor Nelson Sofres)

Top ten brands

Boots
Avon
Clinique
Rimmel
Max Factor
Estée Lauder
Olay
Lancome
Maybelline
L'Oréal

(Taylor Nelson Sofres Aug 1999)

make-up artists, such as Bobbi Brown, François Nars, Ruby & Millie, and Trish McEvoy, have also renewed interest in the sector.

"New technology has boosted market growth, providing better quality products which are more easily applied, last longer and have intrinsic skincare benefits," says Mintel. Transfer-resistant lipsticks, eyelash curling mascara, soft focus foundation and glitter in lip, nail and eye products have all helped to renew interest in wearing make-up.



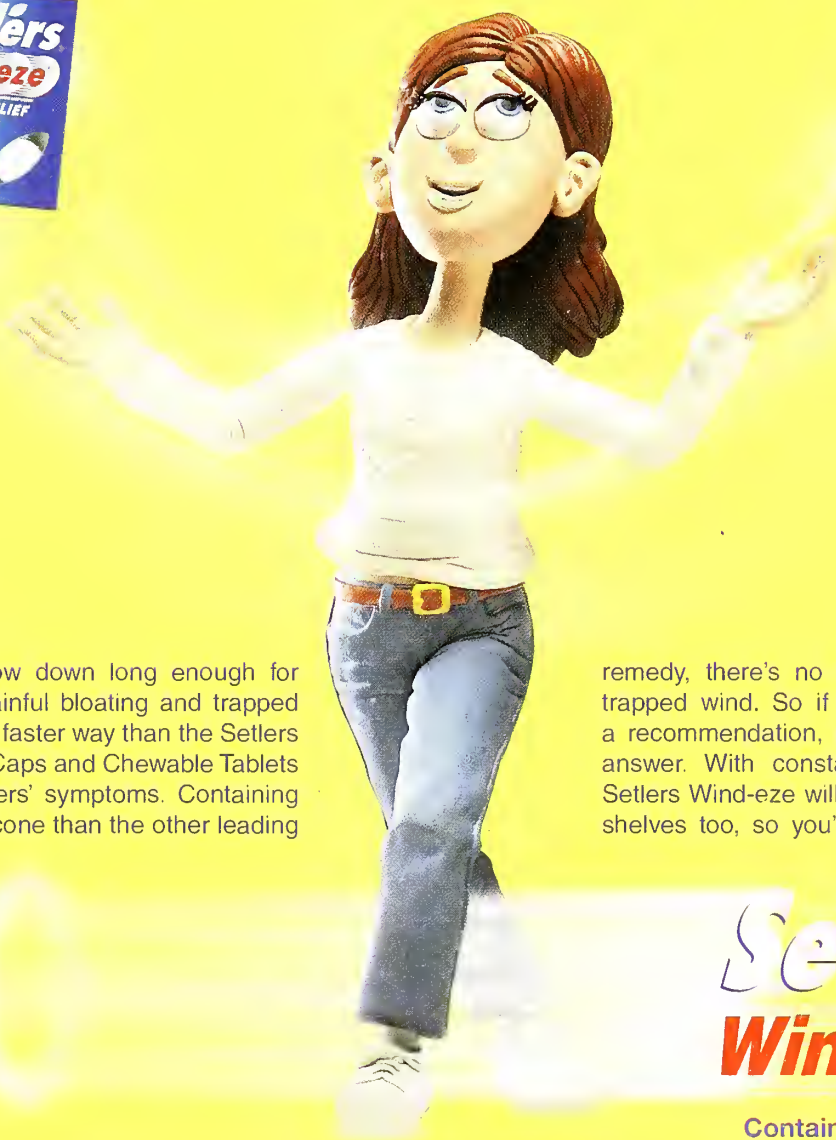
Cutex now 'whitens nail tips'



Miners goes for the glitter



THERE'S NO FASTER WIND REMEDY THAN SETTLERS WIND-EZE



Life doesn't always slow down long enough for us to get relief from painful bloating and trapped wind. Luckily there is no faster way than the Settlers range of Wind-eze Gel Caps and Chewable Tablets to relieve your customers' symptoms. Containing five times more simethicone than the other leading

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Settlers Wind-eze®

Contains simethicone

Express relief from bloating and trapped wind

Product Information: Presentations: **Settlers Wind-eze** – simethicone USP 125mg in a white tablet and **Settlers Wind-eze Soft Gel Capsules** – simethicone USP 125mg in a white soft gel capsule. **Dosage & Administration:** 1-2 tablets **Settlers Wind-eze** to be chewed before swallowing, or 1 **Settlers Soft Gel Capsule** to be taken 3 or 4 times daily as required after meals. Not recommended for children under 12 years. **Uses:** Antiflatulent, foaming agent for the symptomatic relief of flatulence, wind pains, bloating, abdominal distension and other symptoms associated with gastrointestinal gas. **Precautions:** Should not be used by patients with known hypersensitivity to any of the ingredients. Do not

use for longer than 14 days. Seek medical advice if symptoms persist or worsen. May be used safely during pregnancy and whilst breast feeding.

Legal Category: GSL **Cost (inclusive of VAT):** **Settlers Wind-eze** – £1.89 (10's), £3.29 (30's) **Settlers Wind-eze Soft Gel Capsules** – £3.49 (20's). **Product Licence Numbers:** **Settlers Wind-eze** – PL0036/0084, **Settlers Wind-eze Soft Gel Capsules** – PL0036/0073 **Product Licence Holder:** Stafford-Miller Ltd., Welwyn Garden City, Herts. AL7 3SP. **Date of Preparation:** Sept 1998. DO4005

STAFFORD-MILLER

Survival of the fittest

Are independent pharmaceutical wholesalers a dying breed? At face value the outlook is not good - let's look at the figures. There are 13 independent wholesalers and two national. Phoenix Pharmahandel, the German wholesaler whose UK subsidiaries are Philip Harris Medical, Fosters Healthcare, L Rowlands and Border Chemists Alliance, claims to have at least a 10 per cent share of the UK wholesale market. It must now be regarded as a major player and it clearly wants to buy more wholesalers.

Competitive pressures would seem to suggest that the remaining independent wholesalers should, like so many of their predecessors, be either taken over or simply driven out of business. But new names are appearing and established names continue to thrive. For example, Norchem, based in Ferryhill, Co Durham, is more than doubling its warehouse area.

Many independent wholesalers are Numark suppliers. This relationship provides them, their customers and the public with a nationally known and advertised brand. Not all Numark pharmacies have their shops fitted by Numark, and so these shops fail to become fully integrated members of the symbol group. However, the range of own-label stock provides the community pharmacist with value for money merchandise that enables him or her to compete with all comers in the High Street.

The fact that independent wholesalers flourish must mean they are doing at least as well, if not better, than their competitors. That is because they have the following strengths:

- Staff usually know the customers personally, very often on first name terms. Any problems, which can develop quickly if you are delivering up to three times a day, can be solved quickly and effectively.
- The wholesalers have a certain intangible bond with independent pharmacists. While this goodwill counts for nothing if the wholesaler fails to supply the right goods at the right price, all other things being equal, it does have some influence on their relationship.
- Most regional wholesalers do not have to produce profits to keep public shareholders and the City happy.
- Being regionally based, the wholesalers can respond to particular stock demands on a local basis.
- At least one wholesaler trades as a co-operative, with the profits returned to its customers every month. These can amount to a tidy sum and can more than equal the discounts offered by wholesale competitors.
- Some community pharmacists



Guy Prebble

Some people believe independent pharmaceutical wholesalers have a gloomy future. **Malcolm Goldie** argues that they have a firm foundation for survival

object to trading with a wholesaler which runs a retail operation that competes with them. But they must get their supplies somewhere else - an independent wholesaler may be more to their taste.

Ian Brownlee, managing director of Mawdsley-Brooks, says: "Many of our clients are unhappy at the prospect of trading in a market dominated by multinational organisations whose first commitments, quite rightly, are to the efficient running of their own retail organisations."

Such companies are forced to maintain this commitment, he adds, because they are under pressure from institutions and shareholders to increase their profits.

Some people still doubt whether independent wholesalers have a future. Mr Brownlee says that nearly all wholesalers have invested heavily in new facilities and equipment - Mawdsley's has spent millions on a new head office and warehouse, which suggests it is clearly confident about its long-term future.

But he admits independent wholesalers must offer more services, as UniChem and AAH Pharmaceuticals already do, to help pharmacies.

Smaller wholesale companies may lack the resources to deliver such programmes and these would "... certainly [be] beyond the capabilities of their short-line competitors. This may well lead to further consolidation in both sectors".

Provided all UK pharmacies are not eventually swallowed up by multiple chains, who self-supply their branches, or are owned by national wholesalers, independent wholesalers will survive to meet the needs of these outlets.

Their future is also assured if one assumes that pharmacists continue to seek dispensing contracts. There are many successful community pharmacies that provide a good living for their owner managers, but that would not be viable under managers.

Many independent pharmacists would be paying far more for their stock today if independent wholesalers did not exist. *Malcolm Goldie has been a community pharmacist for 37 years. He is now the secretary of two local pharmacy committees and a non-executive director of Norchem, an independent pharmaceutical wholesaler in Co Durham.*

MOTILIUM 10 - ESSENTIAL INFORMATION

Presentation: Small film coated tablet containing domperidone maleate equivalent to 10 mg domperidone base. **Indications:** For the relief of post meal symptoms of fullness, nausea, epigastric bloating and belching, occasionally accompanied by epigastric discomfort and heartburn. **Dosage and administration:** Adults: 10 mg 3 times daily and at night when required. Maximum duration of continuous use is 2 weeks. **Contraindications:** Hypersensitivity to any of the components. Patients with any underlying gastrointestinal pathology, with prolactinoma, or hepatic and/or renal impairment. **Precautions:** Patients who find they have symptoms that persist and are taking Motilium 10 continuously for more than 2 weeks should be referred to a GP. **Interactions:** Adverse interactions have not been reported in general clinical use. However, there is the potential to alter the peripheral action of dopamine agonists such as bromocriptine, including its hypoprolactinaemic action. Domperidone's actions on gastro-intestinal function may be antagonised by anti-muscarinic and opioid analgesics. May enhance the absorption of concomitantly administered drugs, particularly in patients with delayed gastric emptying. **Pregnancy and lactation:** Motilium should only be used during pregnancy on the advice of a doctor. Use by breast feeding women is not recommended. **Effects on driving and use of machinery:** Does not affect mental alertness. **Side effects:** Occasionally transient stomach cramps and hypersensitivity reactions (eg rashes) reported. At higher dosages and longer treatment durations than recommended, a rise in serum prolactin has been reported, which may, rarely, be associated with galactorrhoea, even less frequently, with gynaecomastia, breast enlargement or soreness; there have been reports of reduced libido. Domperidone does not cross the normally functioning blood-brain barrier and therefore is less likely to interfere with central dopaminergic function. However, extrapyramidal dystonic reactions, including instances of oculogyric crises, have been reported. Should treatment of dystonic reactions be necessary, domperidone should be withdrawn and an anticholinergic, anti-parkinsonian or benzodiazepine medication should be given. **Treatment of overdose:** If disorienting extrapyramidal reactions or drowsiness following an overdose, the patient should be closely monitored and treated symptomatically. Administration of gastric lavage and activated charcoal may be helpful. Anticholinergic medication may be useful in managing extrapyramidal symptoms. **Price:** £3.95 per box. **category:** P. **PL:** 13249/0014 **PL holder:** John Johnson. MSD Consumer Pharmaceuticals Enterprise House, Station Road, Loughborough High Wycombe, Buckinghamshire HP10 8JH. **Date of preparation:** June 1998.



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Different customers call it different things. But you know it's that 'nausea' feeling. And that the queasy, churning upset stomach symptoms they feel, often after meals, mean their natural stomach's digestive rhythm has slowed, and almost goes into 'reverse'. Which is why you

should reach for Motilium 10. It's the only OTC treatment clinically designed to restore normal stomach rhythm in the right direction to clear the cause of their nausea*. So recommend Motilium 10. Because whatever they call that feeling, that's the one name you should remember.



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Indicated for post prandial symptoms of nausea and other stomach discomfort symptoms of fullness, bloating and belching

Pharmacists need to be informed about contraception and sexual health, particularly if they want to supply emergency contraception. **Steve Bremer** looks at the state of play

Sex 'n' drugs 'n' pharmacists

The UK has the highest rate of teenage pregnancy in Western Europe and one in five pregnancies ends in abortion. As the most accessible health professionals, pharmacists are well placed to influence these statistics.

Pharmacists' role in reducing these figures has been highlighted in the Royal Pharmaceutical Society's discussion document on sexual health issued in July (see *C&D* July 17, p4). Responses to the document have been positive. "The main point has been strong support for the claim that pharmacy has a role to play," says Roger Odd, head of professional and scientific support at the Society.

The area of the document that has stimulated most debate is the supply of emergency contraception through pharmacies. The Society is currently in discussion with the Department of Health about mechanisms that would enable this to take place. Possible steps include deregulating Schering's PC4 to a Pharmacy medicine, or adding a special clause within the emergency supply regulations. The latter seems more likely at the moment.

Mr Odd is confident that pharmacists will become involved in the supply of emergency contraception. As a member of the Department of Health working party on the subject, he says the DoH supports a pharmacy role in contraception and sexual health.

The exact mechanism for supply has not yet been decided, but Mr Odd believes one will be found.

Mechanisms being explored are within current regulations and will not require a change to primary legislation. Although a change to the regulations "doesn't take very long", it certainly will not happen before the millennium, says Mr Odd.

Alternatives to supply by doctor's prescription have been established in other countries such as the US. In Washington State, pharmacies can supply emergency contraception even though it remains a Prescription Only Medicine. Prescribing authority is delegated to pharmacists, who act within a protocol. In France, a



progestogen-only emergency contraception product has Pharmacy status.

Schering manufactures PC4, the only licensed hormonal emergency contraception product in the UK. The company is proving a stumbling block in discussions with the DoH, says Mr Odd. It is worried about safeguards and that it may be held responsible for any potential problems. Legal liability is a major issue.

While over three-quarters of pharmacists want to be involved in the supply of emergency contraception, a minority feel strongly that they do not. "Their needs should be respected," says Mr Odd. There is provision within both the current and revised versions of the Code of Ethics

for these pharmacists. Only pharmacists with the proper training and a consultation area in their pharmacy will be involved in supply.

Mr Odd emphasises that there is more to pharmacists' role in sexual health than just supplying emergency contraception. "There's no point just giving out the Pill: there has to be something that goes with it." Emergency contraception is just one aspect of pharmacists' role in sexual health.

The Royal Pharmaceutical Society is not the only professional body calling for wider availability. Toni Belfield, director of information and research at the Family Planning Association, says the FPA has been campaigning on this subject since 1995.

Pharmacists are ideally placed to fulfil this supply role, she says. "Pharmacists are very able professionals when properly trained." But she emphasises that if they are going to supply, they have "got to be up to strength" in terms of training and preparation. They must be seen to be suitably qualified because this is such an emotive issue.

The British Pregnancy Advisory Service (BPAS) also believes it would be "sensible" for pharmacists to supply emergency contraception. The Association points to its excellent safety profile, the fact that it works by preventing implantation rather than causing abortion, and the lack of evidence for teratogenicity.

Schering is taking a "fairly conservative approach" to the issue, according to Dr Peter Longthorne, the company's medical director.

"We are totally supportive of the wider availability of emergency contraception," says Dr Longthorne, and "we have no concerns about the degree of expertise that lies with pharmacy". But the main problem is potential misuse, he says, such as women taking several courses during a month.

"If we could find a mechanism to control frequency of usage, there would be no problem," Dr Longthorne is also concerned that pharmacists do not have access to patients' medical records.

Although Schering PC4 is the only product currently licensed for hormonal emergency contraception in the UK, the launch of two more products is expected early next year.

Both of these are progestogen-only preparations. A World Health Organization study published last year showed that emergency contraception using levonorgestrel alone is more effective than the current combined hormonal method (see *C&D* August 15, 1998, p8). A levonorgestrel-only emergency contraception product is already available in some countries, but there is not yet a licensed product available in the UK.

Ms Belfield is glad that the two new products will be available shortly. The lack of a licensed product is creating "misinformation and mess", she says.

The correct dose of levonorgestrol is currently only obtainable from two doses of 25 tablets of a progestogen-only contraceptive tablet.

One of the new products will be distributed by Schering. It is already marketed as Postinor in France, where it is licensed as a Pharmacy medicine. Dr Longthorne expects it to be Prescription Only in the UK. The drug's dossier is currently being considered by the Medicines Control Agency and will be at the Committee on Safety of Medicines in the near future. It should be available early next year.

Postinor has the same level of efficacy as PC4, but around half the incidence of nausea and vomiting, says Dr Longthorne. But for the new product to be effective, it is more important that the two doses are taken as close to 12 hours apart as possible.

The advantages of wider availability of emergency contraception have been shown in a study in which women were given a supply to keep at home. The study of over 500

women in Scotland showed that if they kept a supply at home, it would be used appropriately and may lead to a decrease in the rate of unwanted pregnancies.

"Women aged 16-24 are more than twice as likely to have used emergency contraception than older women"

Almost half the women given the advance supply took the drug at least once during the year and suffered no serious adverse effects. Only 27 per cent of the women who had to obtain PC4 in the normal way used it during the year.

Women in the treatment group were no more likely to use it repeatedly than those in the control group. There were also fewer unwanted pregnancies in the treatment group, although the difference was not significant.

The effect on abortion rates of giving advance supplies of PC4 is currently being studied in Lothian (C&D September 11, p5). GPs and family planning clinics are prescribing the drug to suitable women aged between 16 and 29, who may number up to 85,000. The women are encouraged to continue with appropriate routine contraception. Changes in abortion rate over the

next two years will be compared to those elsewhere in Scotland.

Advance supplies of emergency contraception are already available from the 40 BPAS clinics around the country for a £10 fee. Initial results suggest that most women using the service, which began in July, are professionals in their 20s and 30s, said a BPAS spokesperson. Appointments can be made at the nearest BPAS consultation centre by calling 08 157 30 1030.

Brook family planning clinics will also be offering advance supplies of emergency contraception over the millennium period.

As part of its 'Get it sussed' millennium campaign, Brook's doctors may advance prescribe emergency contraception for clients who will find it difficult to obtain supplies over the holiday period. The campaign also encourages young people to ensure they have enough of their usual form of

contraception and extra condoms for the holiday period.

Ineffective in practice

Abortion services are essential for family planning because women are falling pregnant despite contraceptive efforts, claims the BPAS (C&D October 16, p10).

Britain's largest provider of abortion services surveyed 2,000 women seeking abortion and found that over half had been using contraception when they fell pregnant. Just 41 per cent said they had been using no contraception, while 38 per cent had been using a condom and 17 per cent had relied on an oral contraceptive.

The proportion of women in the survey who said they were using no form of contraception was the same in the under 17 age group as the 30-34 age group (15 per cent).

Because 86 per cent of those surveyed usually use some form of contraception, BPAS suggested that the failure to use contraception on the occasion when they had become pregnant was not a result of ignorance. Rather it may have been due to difficulties in using contraception effectively.



Continued on P28 →

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→ Continued from P27

Sexual behaviour

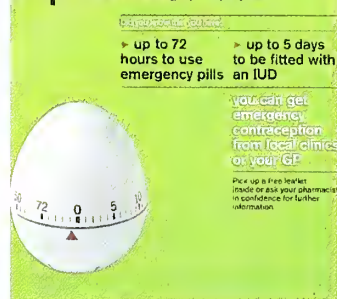
Women aged 16-24 are more than twice as likely to have used emergency contraception than older women, according to this year's Durex Report.

The survey of 8,000 respondents found that 13 per cent of women aged 16-24 had used emergency contraception once in the previous 12 months. A further 5 per cent had used it twice or more. Only 5 per cent of women aged 25-34 had taken PC4 in the previous year.

More than half of respondents cited their GP as their normal source of information on contraception. While about 15 per cent obtained information from friends or magazines and newspapers, only five

Do you think that your contraception has failed?

Have you had unprotected sex?



per cent used pharmacists as a regular source of contraceptive advice.

Condoms were the most popular contraceptive method, used by almost a quarter of respondents, with 21 per cent using a combined oral contraceptive. Just over 10 per cent of respondents had been sterilised, but more than one in five were not using any form of contraception.

The number of young people having unprotected sex has fallen since the previous year's survey, but figures for those in their 20s and early 30s have increased slightly. In the 18-20-year-old age group, 15 per cent reported having unprotected sex.



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Useful numbers

The Family Planning Association provides a nationwide information service on family planning through the Contraceptive Education Service helplines:

- CES England, Tel: 020 7837 4044
- CES Wales, Tel: 01222 342 766
- CES Northern Ireland, Tel: 01232 325 488
- CES Scotland, Tel: 0141 576 5088

The British Pregnancy Advisory Service provides abortion and fertility control services with clinics and branches nationwide. It offers advice on contraception, emergency contraception, abortion, sterilisation, vasectomy and unplanned pregnancy consultation.

- BPAS Action Line 0345 304030.

National AIDS Helpline

Confidential advice about HIV, AIDS, sexual health, local services, clinics and support services. Calls do not appear on itemised telephone bills.

- Tel: 0800 567 123.

Brook advisory centres

Confidential advice on sexual health and contraception for young people.

- Tel: 020 7713 9000.

NHS Helpline

Provides information on family planning services. ● Tel: 0800 665544.

Issue

Advice and information, and a guide to clinics for people with infertility problems. ● Tel: 01922 722888.

London Lesbian and Gay Switchboard

A range of services including sexual health advice. ● Tel: 020 7837 7324.

A campaign to raise awareness of emergency contraception and how it is accessed is running in Westway Primary Care Group in London.

The poster and leaflet campaign is running in 25 pharmacies in the area. One of the key messages of the campaign is that emergency contraception should be accessed as soon as possible, because the efficacy

of the treatment decreases with time lapsed since unprotected intercourse. A logbook is kept to record queries and interventions during the four-week campaign.

To take part, pharmacists and a member of their staff had to attend an evening seminar. Each pharmacy is being paid £300 for participating.

NHS services

Emergency contraception was prescribed on about 0.8 million occasions during 1998, according to Department of Health figures. Three-quarters of prescriptions were by GPs and a quarter of family planning clinics. The Statistical bulletin, 'NHS Contraceptive Services, England: 1998-99', reveals that about 2 per cent of women obtain prescriptions for emergency contraception from hospital accident and emergency departments. Half of women aged 16-49 used a non-surgical method of contraception in 1998, according to the bulletin. About 12 per cent of women in this age group have been sterilised. Just over a quarter of women of this age (about 3 million) were using an oral contraceptive. Just over a fifth of reported using condoms, and about a fifth also took an oral contraceptive. Among the less common methods of contraception used in 1998-99, spermicides accounted for about 0.5 per cent of the total, the female condom for 0.4 per cent, female sterilisation and implants for about 0.14 per cent each, and the rhythm method for 0.1 per cent. Other unspecified methods accounted for 5 per cent - it is thought that many of these women are not using regular contraception but take emergency contraception when necessary.

Sexual health campaign

The Pharmacy Healthcare Scheme will be launching its annual sexual health campaign in conjunction with the FPA in the week beginning December 13. The campaign will be focusing on emergency contraception - what it is, how it should be used, and where it is obtained. It will also provide information on the new progestogen-only emergency contraceptive, and how to access services over the millennium. Leaflets and wallet cards will be distributed to pharmacies during the week.



Diary Dates

- December 13 - Pharmacy Healthcare Scheme and FPA joint sexual health campaign begins
- December 1 - World AIDS day
- February 14-18, 2000 - Contraceptive Awareness Week
- July 5-August 5, 2000 - Sexual Health Week

Next two years crucial for prescribing support role

Prescribing support pharmacists will need a multitude of skills and will have to prove their worth, speakers at a conference in London said last week.

"The key to your future success will be the effectiveness of the service you provide over the next two to three years," said Clive Jackson, director of the National Prescribing Centre, which organised the conference.

"As a group, you are under the microscope, so it is important that you are able to deliver the services required. Make sure you are as effective

as you can be, and that you are able to show how effective you are. In the past, pharmacy has been bad at delivering evidence as to what it can do."

At the last count, 344 primary care groups (covering 91 of the 99 health authorities) had named professionals offering direct prescribing support and advice, he said. Over 440 professionals were involved. Almost all were pharmacists and more than 150 were working full-time for PCGs. Many PCGs were still recruiting, so by next spring there could be over 550.

"Clearly, PCG prescribing advisers now make up an influential new group of professionals in the NHS," he said.

Two new groups were being set up to help them - the Primary Care Pharmacists' Association and the Prescribing Support Pharmacists' Group. In addition, the Pharmaceutical Advisers' Group welcomed PCG pharmacists to its ranks of health authority advisers.

To be effective at national as well as local level, these new professionals

needed a strong, co-ordinated network to prevent isolation and to deliver consensus views to the Government about health policy and strategy.

Mr Jackson went on to say that the NPC would give significant support to primary care prescribing advisers in the future. In a joint venture with the Department of Health, the Centre is hoping to produce a resource document by April, defining the core competencies for prescribing support pharmacists. The next step would be to develop practice standards linked to continuing professional development.

Job description

Sue Noyce, chief officer, St Helens North PCG, said prescribing support pharmacists needed to be "something of everything". They needed sound communication and marketing skills for influencing, negotiating and giving messages in an authoritative way.

As well as keeping up to date with clinical developments, it was important to understand the wider picture of public health, economics and the ethics of rationing medicines, she said.

With the move to primary care trusts, top level pharmacists would manage huge prescribing budgets and be involved in prescribing governance. With their interest in evidence-based medicine, they would play an active part in commissioning and contracting.

"It looks daunting at this stage," she said, but there would be a good career structure to aspire to.

North Essex strategy group receives £30k HA funding

A pharmaceutical strategy group in North Essex has been allocated £30,000 to consider mechanisms of developing pharmacy services in primary and secondary care across the health authority.

The development of a 24-hour on-call service, involving aspects of palliative care is the group's priority. It will also tackle problems associated with high risk prescribing in the area.

Terms of reference for the group, which was set up by the health authority and had its inaugural meeting in September, include the provision of advice on:

- professional issues affecting pharmacy services in primary and secondary care

NPC work to come under NICE umbrella

Between a quarter and a third of the National Prescribing Centre's total work programme is to come under the umbrella of National Institute for Clinical Excellence management.

Writing in the NPC annual report, its director Clive Jackson said that early discussions had suggested that the *MeReC Bulletin* could also prove an important vehicle for disseminating NICE guidelines. This year is a "period of transition" for the NPC, said Mr Jackson, as the Centre develops links with both NICE and the Commission for Health Improvement.

Scottish centre to reduce 'postcode prescribing'

The new Scottish Health Technology Assessment Centre (HTAC), which will evaluate and provide advice to the NHS on the cost-effectiveness of all healthcare innovations, will also tackle 'postcode prescribing'.

Scottish health minister Susan Deacon has told Scottish MPs: "We are committed to tackling this issue to ensure fair and equal access to patients on the basis of real need."

The Centre will encourage effective new treatments to move smoothly into mainstream practice. It will also have a role in reviewing existing treatments to ensure that resources are used effectively.



Clive Jackson

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Q3. Tonics are renowned for their unpleasant and bitter taste. How does Effico Tonic compare? The product was reformulated to improve the flavour. Consumer research indicated very clearly that the reformulated Effico Tonic taste is preferred to its competitors. Effico Tonic has a great tasting mixed fruit flavour.

Q4. Is this an expensive option for my customers?

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* cost per day based on two 5ml spoonfuls taken 3 times daily.

Abbreviated Product Information: Further information is available from the product licence holder: Pharmax Limited, Bexley, Kent, DA5 1XN.

Legal Category: GSL.

French firm plans to set up WSDS-type service for BAPW

A French pharmaceutical data specialist is negotiating with the British Association of Pharmaceutical Wholesalers to offer a Wholesale Sales Data Service-type programme in the UK.

This service would replace the WSDS, which is run by the IMS Health subsidiary, Source Informatics. Using the WSDS, drug manufacturers pay for information about their sales through BAPW members.

Cedegim, based south of Paris, already operates a WSDS-type service in France, where manufacturers receive their data within six days. WSDS, in contrast, takes six weeks to provide the data.

Cedegim's data is anonymised - it does not identify which wholesalers it came from. BAPW hopes to seal a deal by early next year.

If Cedegim agrees a deal with the BAPW, IMS may have trouble selling Source Dispensing, which is in charge of WSDS. Dr Kim Howells, the competition and consumer affairs minister, ordered IMS to sell Source Dispensing after an investigation by the Monopolies and Mergers Commission concluded that IMS had too strong a

hold on the specialised pharmaceutical data services market. IMS has still not found a buyer for the subsidiary.

The French company will also want to negotiate data deals with drug manufacturers in the UK - the timing is right because IMS is under government pressure not to abuse its current near-monopolistic position in the UK drug data market. IMS has to follow strict guidelines to ensure it does not cramp competition in the market.

However, Cedegim may face an uphill struggle wooing the manufac-

turers because IMS has been in the market for over two decades and has forged strong links with many companies.

Meanwhile, Taylor Nelson Sofres Healthcare has signed a deal to market the sales data of BAPW members.

The service will be supplied under the brand name 'Transact' and will include weekly data to named accounts. The details of the data will include the individual packs delivered by the wholesalers.

The service will also be expanded to include a stocking module. TNSH's contract runs for three years, with one year's notice for termination.

Dorothy Knightley, TNSH's group development director, said the service is the next generation of account level sales data. "We are offering services that will enable companies to know precisely when, from where, and to which customer, each sales transaction is made," she said.

Don Mulholland, chairman of the BAPW's SDA/IT committee, denies IMS is being frozen out by the Association. BAPW's contract with IMS runs out on December 31 and both are negotiating a new contract.



Don Mulholland, chairman of the BAPW's SDA/IT committee

Government to control drug prices

The Government has confirmed its intention to bring in legislation which will allow it to control drug price rises.

Health minister John Denham said in the Commons this week that secondary legislation - to put into effect the powers contained in section 34 of the Health Act 1999 - will be introduced.

Section 34 gives the Government the power to control the prices of NHS medicines from suppliers and manufacturers who elect not to abide by the Pharmaceutical Price Regulation Scheme, which is a voluntary agreement.

"Such powers will ensure equity of treatment for those companies which

choose to join the 1999 PPRS and those who do not," said Mr Denham.

So far all but two companies affected by the price reduction in the voluntary scheme have chosen to join the PPRS. If specific drugs do become subject to statutory price control, he will publish the details as soon as possible.

Government sets out internet bill

The Government has published its Electronic Communications Bill which forms a key plank in its strategy to make the UK a centre for global e-commerce.

It believes the Bill is on course to receive Royal Assent by April 2000. Under the legislation, electronic signatures will be legally recognised in courts for the first time, obstacles in existing laws that insist on the use of paper will be scrapped, and a 'kite-marked' self-regulatory scheme will be set up to ensure minimum standards of quality and service. People will be able to check who has sent an electronic message.

CPD Logistics will become Numark's warehouse and logistics provider from February 1. The company, which has licences to handle pharmaceuticals from both the MCA and the Home Office, will replace the TDG Group - Numark's current provider. Ken

Watkinson (left), CPD's director of sales and marketing, said it had recently invested £200,000 in support and procedure systems and it had acquired a 35,000ft² building at its Wellesbourne, Warwickshire-based site. (Right) David Wood, Numark's marketing director



UniChem revamps intranet site

UniChem has updated its intranet system to make it easier to use and to reflect the company's new corporate image.

The site - technically called an 'extranet' because its access is not restricted to UniChem staff - was originally launched last year. Customers were charged £5 a month to use it, but the revamped version is now free. Pharmacists just have to give UniChem their account information and they are then given their password, which enables them to log onto the system.

Around 100 pharmacists used the previous intranet system and UniChem issued around 200 passwords. It said the former model was a test to see how pharmacists would use it and to gauge what else they wanted.

The updated version has improved navigation, which makes it easier for pharmacists to find what they want on the site's home page.

Other new features include:

- 'bookmarks' which provide links to news and healthcare sites, such as *dotpharmacy*, and to sites sponsored by leading suppliers. These include Glaxo Wellcome, Eli Lilly and Medeva, and Crookes Healthcare and Colgate Palmolive

- news bulletin updates, such as reports on flu incidents around the country from Warner Lambert. UniChem said it is talking to other manufacturers who could offer similar services

- a press release section that gives news and up-to-date information on what the wholesaler is doing for customers and consumers

- latest product prices, updated weekly.

As with the former model, pharmacists can order products on line, although the system does not tell them whether the products are out of stock. David Farrow, UniChem's general manager of management services, said: "We don't see this as replacing the paper ordering system because that's already very efficient. But the site allows people to find products quickly and to order them on line."

The product files will be updated daily and the site will feature special offers. On the fourth working day of every month, UniChem will post its customers a statement of what they have bought in the previous month.

Pharmacists who own chains can ensure the group's buying figures can only be seen by the head office, while

individual shops will have access only to their own figures.

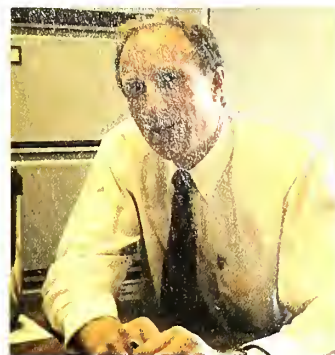
Mr Farrow said many pharmacists are still reluctant to take advantage of the internet, partly because a number had only one PC and would have to close it to 'surf' the net. Those with a busy dispensary could obviously not afford to do this. "Our next step could be to arrange how pharmacists will access the internet ... they could pay a fixed fee which would leave them permanently logged-on. That means they would not necessarily have to close down their dispensary PC," he said.

This could happen early next year, he added, although UniChem would have to sort out the fine details, such as installing extra telephone lines.

UniChem has arranged a deal with Toshiba to offer pharmacists a printer, desktop or laptop computer that could be charged through the pharmacy's account. This route would give pharmacists added cost benefits.

The wholesaler said the equipment was being sold at High-Street prices, but the payments could be spread interest-free over 36 months.

"Our eventual aim is to give the public access to UniChem's web site to get information about our phar-



David Farrow, UniChem's general manager of management services

macy consumers," said Mr Farrow.

Pharmacists who want more information about the intranet should contact UniChem's customer services on: 020 8391 7092/7093.

- Alliance UniChem has acquired a 10 per cent stake in Galenica Holding, Switzerland's leading pharmaceutical wholesaler, and has the option of increasing that to 25 per cent. AU and Galenica will develop joint pharmacy retailing initiatives in Switzerland and will merge their pre-wholesaling businesses to set up a single, pan-European network.

AAH third quarter sales up 18 per cent

AAH Pharmaceuticals' sales rose 18.1 per cent to €2.1 billion (£1.3 billion) for the third quarter to August 30, compared with the same period last year.

Gehe's pharmacy/retail sales, most of which stem from Lloyd's pharmacy, grew 22.3 per cent to €1.1 billion.

The German group's pre-tax profits rose 14.4 per cent to €192 million on a turnover of €10.4 billion, up 11.3 per

cent. It expects its full-year profits and turnover to rise by around 10 per cent.

- Statim Finance, AAH's financial arm, gave a presentation about independent community pharmacy to the British Pharmaceutical Student Association in Leicester last Saturday. Statim director Robert Andrews (below, middle) told the students about aspects of owning a business.



Biocompatibles share jump after Abbott deal

Biocompatibles International's shares rose 50.5p to 380p on Monday after investors heard it had signed a deal with Abbott Laboratories to deliver stents - small, metal scaffolds that are used to keep blood vessels open.

The deal has not yet received regulatory approval - an application is

expected to be filed with the Food and Drug Administration in December.

Biocompatibles expects to receive around \$750 (£469) for every \$1,500 stent sold. The company has also given Abbott the option to license its patented phosphorylcholine coating for its own vascular devices.

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Galen invests £39.7m in plants

Galen Holdings is investing £39.7 million to create 300 new jobs at its plants in Craigavon and Larne, Northern Ireland.

Fifty-one jobs will be in the company's Syngal division at Craigavon, which provides pharmaceutical synthesis and chemical technology services, and 53 at Larne, where it plans to produce its new intra vaginal ring drug delivery system - a treatment for the menopause.

Galen has been offered £10.4 million by the local Industrial Development Board to help fund its expansion.

The news came as Galen reported a 30.3 per cent rise in pre-tax profits to £19.1 million for the year to September. Its turnover rose 37.1 per cent to £67m.

Galen's ethical sales, which account for nearly 58 per cent of its turnover, grew 19.1 per cent to £38.6m.

The group is increasing its final dividend by 25 per cent to 1.10p per share. Its shares rose 60p to 667.5p and, as *C&D* went to press, had settled at 632.5p.



(L-R) Peter Mandelson, secretary of state for Northern Ireland and Dr Allen McClay, Galen's chairman, inspect the group's Craigavon plant

British Biotech may hire out laboratory facilities

British Biotech could hire out laboratories to other research companies to raise extra cash.

Since the company decided to cut costs last year it has shed over 100 jobs, which has helped to reduce its first half losses this year by 31 per cent to £11.4 million, compared with the same period last year. But the company spent £1.7 million last year on recruiting executives and on severance pay for those who left.

Renting out excess premises could earn the company between £500,000

and £1 million.

BB is still reeling from a series of setbacks, following the departure of Andrew Millar, its former head of clinical trials, who had publicly expressed doubts about the company's clinical trials for Zacutex.

In February, for example, the company's share price collapsed after it revealed that its cancer drug, marimastat, had not met its targets in a pancreatic cancer clinical trial.

Dr Elliot Goldstein, BB's chief executive, said the company had made

progress over the past six financial months: marimastat showed encouraging signs in patients with advanced gastric cancer and has been licensed to Schering-Plough.

BB's expenditure, meanwhile, has been reduced by 30 per cent to £12.1m. Its income during the half year fell 30 per cent to £2.6m, and its research and development spend fell 32 per cent to £12.7m.

The company's shares fell 4p to 28.5p and, as *C&D* went to press, had dropped to 27.5p.



Boots the Chemists' newly refurbished store in Manchester is featuring SSL International's first in-store Durex vending machine. The dispenser is sited in the store's men's area and is selling Durex's top selling condoms

COMING EVENTS

NOVEMBER 27

Scottish Borders Branch, RPSGB, Ghosts and witches tour, Edinburgh, 8pm. Tickets must be pre-booked.

NOVEMBER 29

Slough & District Branch, RPSGB, the John Lister Postgraduate Centre, Wexham Park Hospital, Slough, 8pm. 'Sexual Health'. Dr Stephen Dawson.

NOVEMBER 30

Oxfordshire Branch, RPSGB, at George Pickering Postgraduate Centre, John Radcliffe Hospital, Oxford, 7.30 for 8pm. 'Obesity Treatments'.

DECEMBER 2

Bath & District Branch, RPSGB, 'Continuing professional development'. Speaker: Claire Grout.

IN BRIEF

Weldricks buys pharmacy

Danaster-based Weldricks Pharmacy has acquired a pharmacy in Danby, South Yorkshire. The chain now owns 32 outlets.

PowerGen launches web site

PowerGen has launched a web site that will allow pharmacists to apply for electricity and gas on line. The site will offer £50 cash back to businesses who use it to apply for PowerGen's services. A built-in calculator will enable pharmacists to work out how much money they might save by switching to PowerGen. The address is: www.powergen-power.co.uk.

Scotia drug earns orphan status

Scotish biotech company Scotia Holdings has won US orphan drug status for Fascan, its photodynamic cancer therapy. Orphan drug status is normally reserved for diseases where there are fewer than 200,000 patients. Fascan aims to ease the symptoms of incurable head and neck cancer.

New Nucare share issue early 2000 Don't miss out...

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Fit for the Millennium

Your pharmacy could go down as an icon of the year 2000. If you have designed, refitted or redeveloped part of a pharmacy between January 1998 and December 1999, you are eligible to enter the Millennium Pharmacy Design Awards, co-sponsored by *Chemist & Druggist* and Whitehall Laboratories. There are prizes totalling £5,000 for pharmacies which are 'fit for the millennium'

The rules

Work on the refit must have taken place between January 1, 1998, and December 31, 1999.

Entries must be printed or typewritten on A4 paper and accompanied by an entry form giving the category entered and the address of both the pharmacy and the shopfitter/designer.

Entry forms are available from Jan Powis at *Chemist & Druggist* (tel: 01732 377487), Don Sibley at Whitehall Laboratories (tel: 01628 669011) and from Whitehall sales representatives.

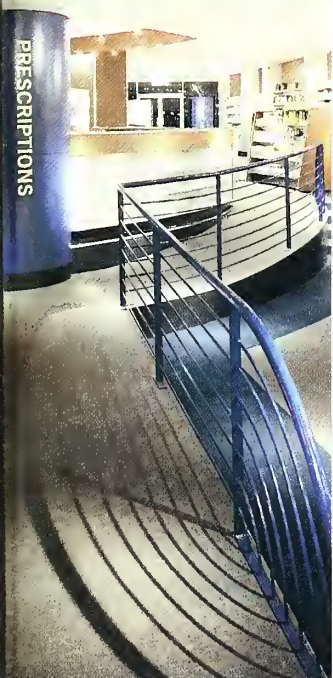
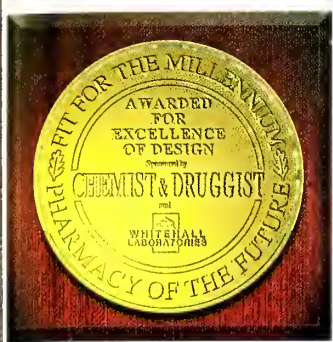
Entries should be sent to 'Fit for the Millennium', *Chemist & Druggist*, Miller Freeman House, Sovereign Way, Tonbridge, Kent TN9 1RW.

The closing date for entries is February 1, 2000.

Judging will take place on February 17. The judging panel will be drawn from the pharmaceutical profession and the shopfitting industry. The sponsors will be represented by Patrick Grice, editor of *Chemist & Druggist* (non-voting chairman), and Don Sibley, Whitehall Laboratories.

The winners will be invited to an Awards Luncheon, and the results announced in *Chemist & Druggist* prior to April 30, 2000.

Chemist & Druggist retains the right to publish details of any of the entries submitted.



It's tough out there in the retail jungle, and the competitive pressures are intense. Pharmacies, like any other retailer, need to sell an image of what their business is about to help attract customers.

It starts with the fascia and window display, makes an impact in the front shop and for most people will conclude at the counter. The image is made up of the shop's layout and design, the type, range and variety of its merchandise, and the service offered by its staff.

The Pharmacy Design Awards concentrate on the environment, the stage on which the retail theatre is built. This is the fifth Pharmacy Design Awards, and once again we are looking for pharmacy businesses that have successfully created a professional healthcare retail environment.

The awards are open to all, from small independents to major multiples. There is a prize fund of £5,000 split between two categories, recognising major refits and smaller initiatives.

Many pharmacists have realised the benefits a refit can bring, and if you are someone that is proud of the result, why don't you tell us about it?

The categories

Entries to the Shop Design Awards

can be made in the following categories:

1. Newly opened pharmacy or a major refit involving all or a major part of the shop floor.

The judges will be looking for shopfittings and a layout that is functional and sympathetic to the building and the nature of the pharmacy business. Emphasis will be placed on how successfully the finished result puts across the image of the pharmacy as a healthcare retailer within the constraints of the project's budget.

2. Special feature or partial refit

This category seeks to recognise innovative features that pharmacies have had fitted to improve the premises, but which fall short of a major refit. Examples might include special features in a refitted dispensary or medicines counter; counselling areas or consultation facilities; shop fronts and fascias; window display areas; retail fixtures with a specific focus; use of information technology, and so on.

The prizes

The prizes awarded will be:

Category 1: £2,000 for the winning pharmacy, with £1,000 for the runner-up, and winner's plaques for both
Category 2: £1,000 for the winning pharmacy with £500 for the two

runners-up, and winner's plaques for all three.

How to enter

Entrants must describe in no more than 700 words the principal objectives of the work undertaken, how they were achieved in practice, and the impact on the business.

The following could usefully be included in your submission:

- the timetable and programme of work in carrying through the project
- the budget and how the refit was costed
- evidence of what the shopfit/special feature has delivered to the business in terms of customer satisfaction, increased footfall and higher turnover
- photographs (before and after) and architects' drawings to illustrate the shopfit or special feature.

Eligibility

- Pharmacy proprietors
- Pharmacy managers
- Head office (for multiples)
- Shop designers/planners

(Pharmacy managers should obtain the consent of their head office or the owner before submitting an entry. Shop fitters/designers should seek the consent of the party who commissioned the work.)

Classified

Appointments £27.00 P.S.C.C. + VAT minimum 3x1. General classified £18.00 P.S.C.C. + VAT minimum 3x2. Box numbers £15.00 extra. Available on request. Copy date 4pm Tuesday prior to Saturday publication. Cancellation deadline 10am Friday; one week prior to insertion date. All cancellations must be in writing. Contact Debra Thackeray, Chemist & Druggist (Classified), Miller Freeman UK Ltd, Sovereign Way, Tonbridge, Kent TN9 1RW. Telephone 01732 377493, Fax: 01732 377179. Internet: <http://www.dofpharmacy.co.uk>. All major credit cards accepted



APPOINTMENTS

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This is a real opportunity for an enthusiastic and dynamic individual to make an immediate impact and build a career.

Ideally we are looking for a pharmacist for this role, but we will consider applications from other candidates who have relevant experience.

The rewards will be commensurate with the position and do include a fully expensed car.

If you wish to apply, please send your CV and covering letter, stating current salary to: **Alison Stubberfield, Human Resources, UniChem Limited, UniChem House, Cox Lane, Chessington, Surrey, KT9 1SN**

Closing date: 6th December 1999

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UniChem

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We currently have a vacancy for a pharmacist (fully or partially qualified), a dispenser or a pharmacy technician to work on a major new project. The role involves the updating and maintenance of the database core to an innovative, new data source in the UK.

We are looking for someone who

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- Has good attention to detail
- Has a good telephone manner

The position will be based in Maidenhead. Salary will be in the range £15,000 - £20,000, whilst a full time role the opportunity does exist for a job share for the right candidates. The ability to speak French would be an advantage.

To apply for the position please send your CV with a covering letter to: **Liz Saunders, Business Unit Director, InfoSanté Ltd, Albany House, Market Street, Maidenhead, Berkshire SL6 8BE**

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Contact: **Bell Pharm Ltd**
01642 314251



I would like to take this opportunity to thank our past and present clients for their business and to inform you of booking and copy deadlines over the festive season.

We are combining the 18th and 25th December issues and will accept advertisements up until Tuesday 14th December at 2 p.m.

Our Millennium issue, which is January 1st, we will be accepting copy up until Monday 20th December at 2 p.m.

Debra Thackeray

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RV9911	Square Full Nails x 20	£1.99	£1.13	£1.10
RV9912	Square Full Nails x 20	£1.99	£1.13	£1.10
RV9841	100 Oval Nail Tips	£7.99	£4.41	£4.30
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RV9856	Gel Starter Kit	£13.99	£7.54	£7.35
RV9884	Nail Glue	£2.99	£1.64	£1.60
RV9886	Nail Glue & Nozzle	£2.99	£1.64	£1.60
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Normal Cost	£0.85
Special Offer	£0.72
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Total Cost 2 Dozen	£17.28

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JARS MOQ (1 Dozen)	STICK MOQ (2 Dozen)
(DOZEN)	(DOZEN)

Peppermint Order Qty

JARS MOQ (1 Dozen)	STICK MOQ (2 Dozen)
(DOZEN)	(DOZEN)

Customer Name
 Address
 Tel:

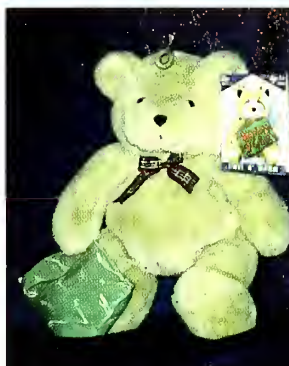
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Business Link

A free service for C&D subscribers

Free entries in 'Business Link' (maximum 30 words) are restricted to community pharmacist subscribers to *Chemist & Druggist*. No trade advertisements will be permitted. Adverts must be submitted on the coupon (right), which must be properly completed, and include an expiry date for products. Acceptance is at the discretion of the Publishers and depends on the space available. Pharmacists should only advertise medicines for sale where the product is discontinued or in short supply. Medicines must be unopened and in original packaging.

To: Business Link, CHEMIST & DRUGGIST, Miller Freeman House, Sovereign Way, Tonbridge, Kent TN9 1RW.

PLEASE COMPLETE IN BLOCK CAPITALS

Surname

First names

Address

Postcode

Personal RPSGB Registration number

Telephone Number

Proposed advertisement copy (maximum 30 words)

Fishy Follicel claims to be nasty to nits



Roger Dawson with supplies of Follicel in his Preston pharmacy

It's amazing what a dash of serendipity and some editorial in *The Daily Telegraph* can do for sales of a product. A preparation originally designed to treat infections in fish is now being marketed as a head lice treatment and the manufacturer claims to be swamped with orders.

Despite claims of its effectiveness from pleased parents, Follicel's manufacturer is making no medicinal claims. Marabou says only: "It's an excellent scalp conditioner which will make the environment unacceptable for head lice."

Derived from the processed pulp of citrus fruits, Follicel is now being touted as a lice exterminator on anything from fish to guinea pigs, and rats to reptiles. Its virtues are extolled by everyone from veterinarians and fish consultants to *The Daily Telegraph* and Cornish rabbit breeders.

Roger Dawson, proprietor of Pomfrets Chemists in Preston, although sceptical at first, has found it to be an "acceptable preparation" and reports many satisfied customers. Follicel is available from Marabou, 418 Oakshott Place, Walton Summit Industrial Estate, Burnley Bridge, Preston PR5 8AT. It retails at £6 for 100ml. Don't all rush at once!

Beefy's blister-free walking feat

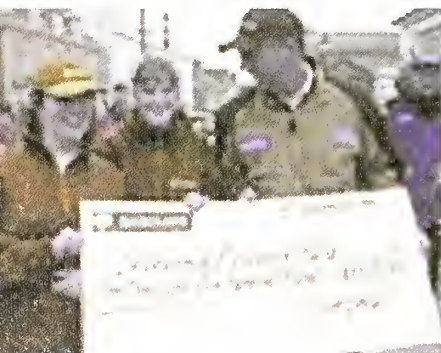
Ian Botham will be resting his tired body after completing his charity walk from John O'Groats to Land's End. But he claims to owe the remarkably good state of his feet to Compeed plasters.

"I couldn't do it without them, they kept me on my feet," said a blister-free Beefy after his feat of endurance. England's former all-rounder walked non-stop for 34 days, covering a distance equivalent to a marathon each day.

Compeed employees raised £1,500 for the charity effort and even joined Ian during the walk on November 5. Ian is pictured on the final day of his walk receiving his cheque from Tracey Tourle, senior product manager for Compeed (centre), and Victoria Thomas, Compeed competition winner.

Ian first walked for charity in 1985 and has since covered 3,380 miles, raising £1,000 a mile for the Leukaemia Research Fund. Anyone wishing to increase this figure without making Ian walk any further, can make a donation via Passion Communications on 020 7321 2700.

L-r Victoria Thomas, Compeed competition winner, Tracey Tourle, senior product manager, Compeed, and Ian Botham



APPOINTMENTS

Duncan Eaton has been appointed chief executive of the new NHS Purchasing and Supply Agency. Mr Eaton is chief executive of Bedfordshire Health Authority and president of the Healthcare Supplies Association.

Marlene Thomas and **Patrick Moriarty** have been appointed non-executive members of Gwent Health Authority. **Jill Penn** has been appointed as a non-executive member of Bro Taf Health Authority.

Mawdsleys has appointed **Anne Mogg** as finance administrator.

The Shop and Display Equipment Association has appointed **Veneda Harris** as a marketing assistant.



Mawdsleys' Anne Mogg



Andrew Evans, of JDS Evans Chemist, Newport, has been named this year's UniChem Pharmacist Golfer of the Year. Andrew outplayed 29 other finalists at the Dalmahoy Golf & Country Club, Edinburgh to win the silver rosebowl trophy. "To qualify was great, but to win was one of my proudest moments. I'm delighted to bring the trophy back to Wales," he said

Andes challenge makes SENSE

A Boots store manager from Caterham is planning to cycle 235 miles across the Andes to raise money for charity.

Sarah Colgan is going to cycle from Puerto Montt in Chile, through the "Chilean Lake District", across the Andes and into the Patagonian region of Argentina. The challenge will be "a real test of determination and stamina", and will raise over £2,000 for SENSE, the deafblind and rubella association.

Sarah has been "nabbing a lot of my customers and staff" for sponsorship, but is also organising a wine tasting evening, a boot fair, and hopes to arrange a sponsored 'non-uniform' day at a local school.

Sarah regularly cycles the 18-mile round trip to work and back and is no stranger to exotic cycle rides: the intrepid pedal-pusher cycled through Borneo last year. And she still has four months to get in shape before the seven-day challenge begins on April 1.

Anyone wanting to sponsor Sarah can contact her on 01883 346257.



Sarah Colgan - on her bike

It's that time of the year ...

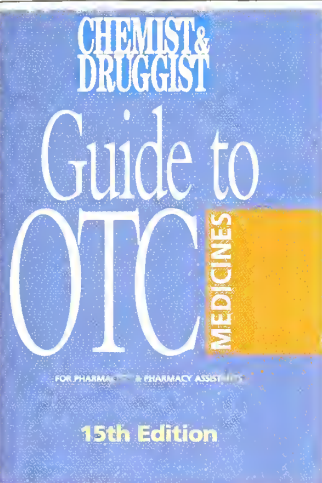
As Christmas approaches, thoughts turn to stocking fillers for the kids, something for old Aunt Edith and the consequences of all this seasonal generosity on your bank balance. If you are of a criminal bent you may be tempted to relieve some unsuspecting retailer of a small (but inevitably expensive) item to help stretch the budget.

Malcolm Yee, of the Watlington Pharmacy, Watlington, called last week with a salutary tale which should remind shopkeepers that they need to be especially vigilant at this time of the year to stop those Christmas gifts walking out of the door unpaid. Not once, but twice (some people do have a nerve!), did he and his staff apprehend a 'gentleman' moving expensive fragrance and aftershave to shelving nearer the front of the shop. Since he did not purchase it, they assume he was positioning it for a quick lift later on, either by himself or a partner.

So if you happen to catch sight of a stocky 40-year-old man, 5ft 8in tall, who drives a gold-coloured Maestro and wears a Barbour-type jacket (complete with poacher's pockets, no doubt), keep an eye on him!

Literature update

These leaflets are available from manufacturers to help you advise your customers



OTC Guide 15th Edition

Additional copies are available to subscribers for £7.50 (incl p&p). For non-subscribers the price is £10.00.

Extra copies may be obtained by sending a cheque made payable to 'Miller Freeman UK Ltd' to:

Jan Powis
Miller Freeman UK Ltd
Sovereign Way
Tonbridge
Kent TN9 1RW

Telephone: 01732 377487



Roche offers leaflet support for cystitis and period pain

In conjunction with Cystopurin, the cystitis treatment flavoured with natural cranberry juice extract, Roche Consumer Health has produced a help leaflet, 'Cystitis – a guide to prevention & treatment'.

Roche has also produced a leaflet entitled 'Period pain – the causes and solutions', to support the product Feminax, a remedy developed to combat period pain.

To obtain free copies of both leaflets, write to: PO Box 2557, London W1A 3JS, stating quantities required.

Napp Pharmaceuticals Ltd has produced an easy-to-read educational leaflet for people suffering from angina.

The leaflet, which includes a foreword by Dr Chris Steele – resident GP on ITV's 'This Morning' – is designed to answer questions that are often asked by angina sufferers. Advice is provided on drug therapy, the importance of aspirin and lifestyle changes that can help in the treatment of angina.

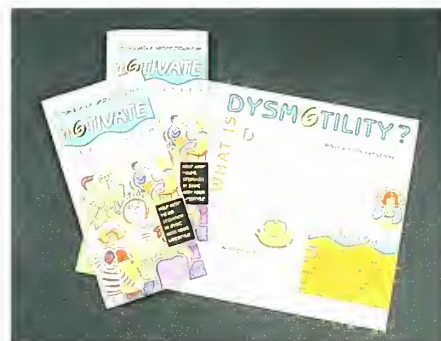
The leaflets will be freely available to GPs, nurses and pharmacists for use in consultation with angina patients. To obtain copies of the leaflet, please write to: Angina Leaflets, FREEPOST, MID 17580, Nottingham NG7 1BR.



New Dysmotility Awareness campaign launched for consumers

A new 'Dysmotility Awareness' helpline and leaflet has been launched for consumers by Johnson & Johnson MSD Consumer Pharmaceuticals to support Motilium 10 – the only treatment available exclusively OTC for the treatment of dysmotility. Available to pharmacies on request, the leaflets provide information on dysmotility and Motilium 10 and include a simple lifestyle questionnaire to help readers identify if they could be suffering from the condition.

Leaflets are available for pharmacists by contacting J&J MSD Consumer Pharmaceuticals on 01494 450778



Safe & Sound with Tea Tree

Paul Murray plc, a UK supplier of leading brands in health and beauty, has expanded its personal care brand Safe & Sound with another new product aimed at school children.

Safe & Sound has introduced Tea Tree Conditioner to its successful Tea Tree Shampoo range. The conditioner is a gentle but effective rich creme conditioner for use on all hair types and is formulated with pure tea tree essential oil for gentle antiseptic qualities, and also to help prevent dandruff. Both the Safe & Sound Tea Tree Conditioner and Shampoo are available in 250ml bottles and priced at £2.49.

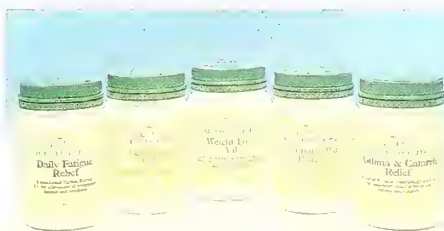
Contact Nick Hayton at Paul Murray plc, School Lane, Chandlers Ford, Hants SO53 4YN. Tel: 01703 268444

Herbal Concepts launches new range of fully licensed traditional remedies

These first stage product launches are in tamper-evident pots with clear graphics, which make easy merchandising on-shelf. The pack is clear as to its curative treatment and makes every effort to simplify the task of the consumer's decision.

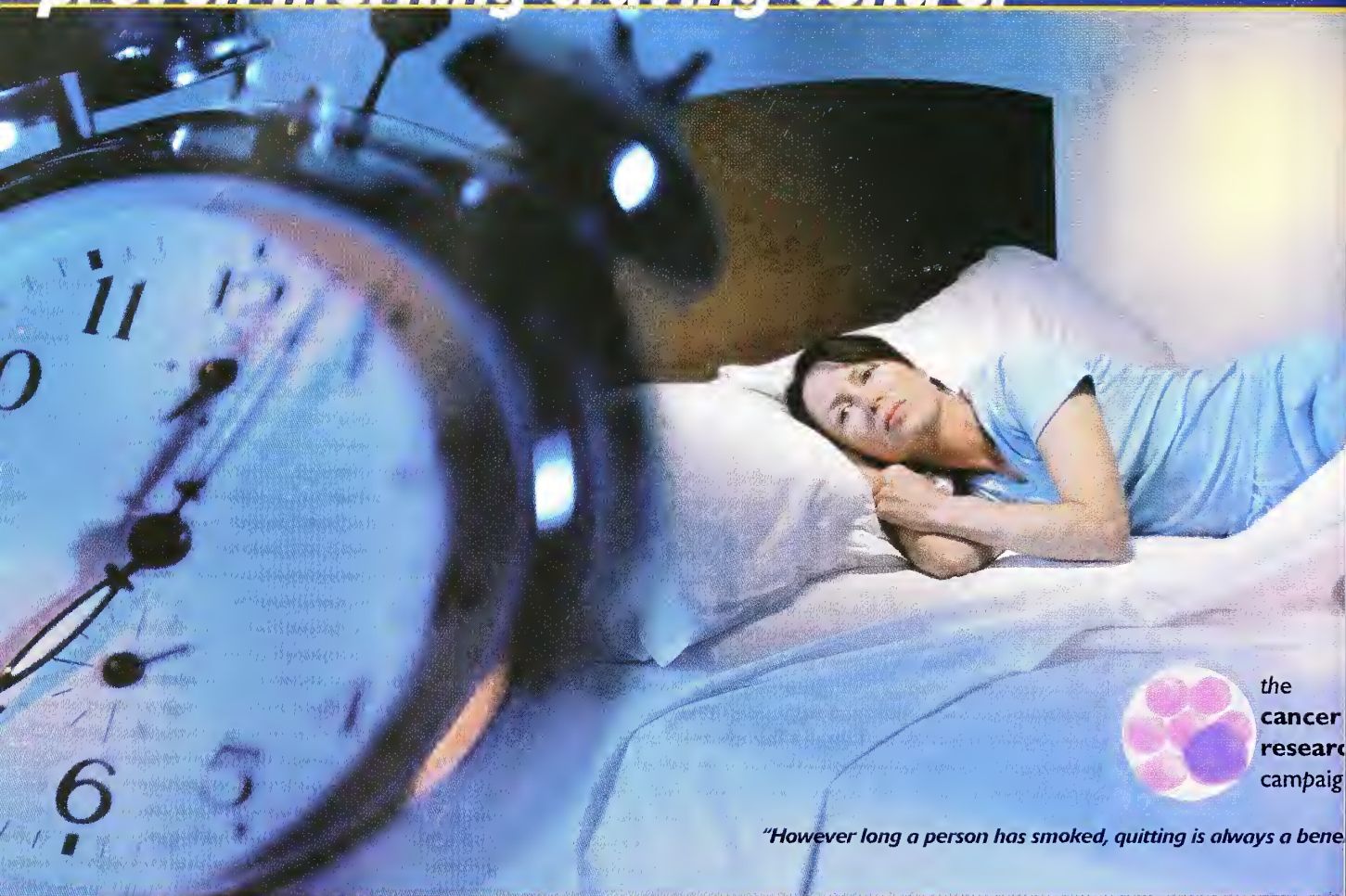
The range includes Period Pain Relief (£2.99), Rheumatic pain Relief (£3.49), Asthma and Catarrh Relief (£4.99), Daily Fatigue Relief (£4.99) and weight Loss Aid (£4.99).

For more information, telephone 01296 689045, or e-mail: contactus@herbal-concepts.co.uk



For further information please contact Debra Thackeray on 01732 377493

Her pharmacist knows about NiQuitin CQ's proven morning craving control¹



the
cancer
research
campaign

"However long a person has smoked, quitting is always a benefit."

**And at seven am
so does she**

Morning cravings are often the most difficult time for smokers. NiQuitin CQ has clinical evidence to prove morning craving control¹.

NiQuitin CQ's advanced patch design helps ensure that from one morning right through to the next, the temptation to smoke is kept firmly at bay.

NiQuitin CQ
Nicotine
STOP SMOKING AID



HELP HER STAY CALM, IN CONTROL - AND QUIT

NiQuitin CQ Product Information. Presentation: Matt, pinkish-tan, square, transdermal patches. Available in three strengths (sizes): NiQuitin CQ Step 1 (containing 114mg nicotine per 22cm² patch), NiQuitin CQ Step 2 (containing 78mg nicotine per 15cm² patch), and NiQuitin CQ Step 3 (containing 36 mg nicotine per 7cm² patch), delivering 21mg, 14mg, 7mg nicotine respectively in 24 hours. **Indications:** Relief of nicotine withdrawal symptoms, including craving, associated with smoking cessation. If possible, use as part of a smoking cessation plan. **Dosage and administration:** Patch users must stop smoking completely. For a habit of more than 10 cigarettes a day, start with Step 1 for 6 weeks, then continue with Step 2 for 2 weeks and finish with Step 3 for 2 weeks. For a habit of 10 or less cigarettes a day, start with Step 2 for 6 weeks then finish with Step 3 for 2 weeks. For best results complete full course of treatment. Do not use for more than 10 consecutive weeks. If patients still smoke or resume smoking they should seek doctors' advice before using a further course. Apply patch to clean, dry skin site once a day preferably soon after waking. Remove patch after 24 hours and apply new

patch to a fresh skin site. Patches may be removed before going to bed. However, 24 hour use is recommended for optimum effect against morning cravings. Wear only one patch at a time. When handling patch avoid touching eyes or nose. Wash hands after use in water only. **Contraindications:** Use by non-smokers, occasional smokers or children. Hypersensitivity to the patch or its components. **Precautions:** Use only on doctors' advice in cardiovascular disease (e.g. angina, stroke, arrhythmias, severe peripheral vascular disease, recent myocardial infarction), uncontrolled hypertension; severe renal or hepatic impairment, peptic ulcer, hyperthyroidism, insulin-dependent diabetes, phaeochromocytoma, atopic or eczematous dermatitis. Concomitant medication may need dose adjustment due to reduced nicotine levels; caffeine, theophylline, imipramine, pentazocine, phenacetin, phenylbutazone, insulin, adrenergic blockers may need dose decrease; adrenergic agonists may need dose increase. Patients should be warned not to smoke or use other nicotine-containing patches or gums when using NiQuitin CQ. Keep safely away from children. **Side effects:** Transient rash, itching, burning, tingling at site of application should resolve on

removal of patch; rarely, allergic skin reactions. Occasional tachycardia. Other systemic effects may relate either to use of patches or smoking cessation: nausea, mild stomach upset, constipation, cough, sore throat, dry mouth, muscle/joint pain, headache, weakness, flu type symptoms, dizziness, sleep disturbance. Mild effects should resolve with continued use. Troublesome, Step 1 users can step down to Step 2 for remainder of initial 6 weeks, then use Step 3 for final 2 weeks. **Pregnancy and lactation incl. trying to become pregnant:** Use only on advice of a doctor. **Legal category:** P. **Product licence numbers:** NiQuitin CQ 21mg (Step 1) 00079/0347; NiQuitin CQ 14mg (Step 2) 00079/0346; NiQuitin CQ 7mg (Step 3) 00079/0345. **Product licence holder:** SmithKline Beecham Consumer Healthcare, Brentford, TW8 9BD, U.K. **Pack size and RSP:** All strength patches £19.95, Step 1 only 14 patches £35.95. **Date of revision:** February 1999. **NiQuitin CQ, CQ and Commit Quitters** are trade marks.

Reference:
1. Data on file, SmithKline Beecham Consumer Healthcare.

SB

NOVEMBER 1999

OTC



Introducing Angelina Coxon, winner of the OTC & Miners Cosmetics model competition

Prescribing Information
E45 Itch Relief Cream

E45 Itch Relief Cream contains lauro-macrogols 3% w/w and urea 5% w/w.

Usage:

Pruritus, eczema, dermatitis and itchy skin conditions where an antipruritic and/or hydrating effect is required.

Dosage and Administration:

Adults, the Elderly and Children: E45 Itch Relief Cream applied as directed.

There is no need to stop breastfeeding when using E45 Itch Relief Cream. However, the clinical response.

Contra-indications:

Patients with known hypersensitivity to any of the ingredients. It should not be used to treat acute

eczema, acute inflammatory, oozing or infected skin lesions.

Special Warnings and Precautions for use:

May cause irritation if applied to broken or inflamed skin. It should not be used on the breasts immediately prior to breast feeding during lactation.

Undesirable Effects:

burning sensation, erythema, pruritus or the formation of pustules. Contact allergy has been reported.

Package Quantities:

Tubes containing 50g.

Cost: £3.29. (RSP)

Legal Category:

GSL.

Product Licence

Number:

0327/0122

Product Licence

holder:

Crookes Healthcare,

Nottingham, NG2 3AA.

Date of Preparation:

July 1999

References:

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1999; April; 52.

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1996; 13 (9): 529-537.

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SUPPLEMENT TO CHEMIST & DRUGGIST

November 27, 1999

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© Miller Freeman UK Ltd 1999

Published by Miller Freeman UK Ltd

Sovereign Way, Tonbridge, Kent TN9 1RW

Telephone: 01732 377487

Fax: 01732 367065

Miller Freeman

A United News & Media publication



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OTC

OVER THE COUNTER

Volume 12 Number 80

November 1999

Yellow fever

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Are you listening?

Asking questions and really listening to the answers are key skills for assistants, says training consultant Diane Bailey

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Cover photo & fragrance credits

Photographer: Ryan Davies
Assistant and styling: Alex Musson

Model: Angelina Coxon, winner of the 1999 OTC & Miners Cosmetics Assistant model competition

Make-up artist: Caroline Donnelly, Miners make-up artist

Hair stylist: Carlos Ferraz

Shoot directed by Tony Lamb

Turn to page 14 to find out about Angelina's day in London for her make-over and photographic shoot. Angelina also appears in our fragrance feature on page 18





This Christmas and New Year period is likely to be even more chaotic than usual. Predictions about the effects of the Millennium Bug range from riots on the streets to food shortages and mass suicides. Although these scenarios are now being dismissed as highly unlikely, pharmacies will be busier for a variety of reasons.

Firstly, no matter what they are told, some patients are bound to stock up on their medicines and prescriptions – 'just in case' – and this could have a knock-on effect, actually creating artificial shortages.

The Government will also be driving more customers to your pharmacy for cough, cold and sore throat remedies. A £1m winter campaign encourages the public to make appropriate use of health services, going to a pharmacy as an alternative to the GP or local Accident & Emergency unit. As part of the same campaign, young men are being encouraged by posters in pub toilets and beer mats to 'Ask your pharmacist'. And on January 4 we can make a good guess of what they will be asking for!

In a separate initiative, the Department of Health is spending £1.3m trying to explain to the public that antibiotics don't work for colds most coughs and sore throats and that patients shouldn't be surprised when GPs suggest alternatives – such as OTC medicines. So now is a good time to brush up on your knowledge about colds, flu, coughs and sore throats (check out our winter ailments features on pages 30 to 38, then test yourself on page 46).

Finally, you cannot have failed to notice our stunning cover featuring Angelina Coxon, the winner of the OTC & Miners Cosmetics model competition. Turn to our feature on page 14 to find out about her big day in the studio.

Maria Murray

Supplement co-ordinator

News

£1m campaign directs the public to pharmacies

The Government is spending £1 million on a winter campaign which promotes pharmacies as an alternative to the GP or A&E.

The aim of the campaign is to educate the public into making first contact with the NHS at the appropriate level, but there will be a heavy emphasis on making more use of pharmacies. The campaign has two main elements.

The first is a general advertising campaign targeting women as family health guardians. It presents the choice of available NHS services as the contents of a 'homely' medicines cabinet, under the theme 'Choose the right remedy' – pharmacy, NHS Direct, the GP surgery and A&E.

The second initiative is aimed at young men and will be a prominent part of pubs and clubs – washroom posters and beer mats will use humour to attract the attention of young males as they celebrate the festive season and remind them to 'Ask your pharmacist'.

● The Department of Health is spending £1.3m on a campaign to educate the public about antibiotic resistance. Adverts will appear in newspapers and magazines, and posters in pharmacies and surgeries will tell the public that antibiotics do not work on coughs, most colds and sore throats.

Age exemption checks

By now most of your regular customers, will be aware of the need to produce evidence if they are claiming exemption from prescription charges on the grounds of age. The new checks, introduced on October 5, cover patients under 16, those aged 16, 17 or 18 and in full-time education, and those aged 60 or over.

Most GP software companies have amended their software to print the date of birth and age of all patients on computer generated prescriptions, which is accepted as sufficient evidence. Patients who are 16-18 and in full-time education will need to show proof of their student status.

An NHS medical card will be an acceptable form of evidence if there is no date of birth or age on a handwritten prescription. Patients with no evidence should still have their prescriptions dispensed, providing the exemption declaration is signed but the form should be marked accordingly.



Congratulations to Karen Hayward (centre), from Highfields Pharmacy in Allerton-by-Water, who has won a bottle of champagne for successfully completing the C&D Cambridge Counterpart training course. Karen is pictured with Lesley Settle, supervising pharmacist, and Jonathan Harkley, Whitehall territory manager



Chicken Breasts with Liotro Orange Cream

All of us should be eating at least five portions of fruit or vegetables every day to maintain our health. To help us reach this target the Fresh Fruit & Vegetable Information Bureau has created this tasty dish. The quantities given should serve four people

Ingredients

4 chicken breasts, skinned and boned
Seasoned flour
Beaten egg
Fine breadcrumbs
2oz butter
2tblsp oil

Sauce

1/4 pint mayonnaise
1/4 pint natural yoghurt
Salt and freshly ground black pepper
Finely grated rind of one Liotro Ruby Red orange
2 spring onions

Garnish

Peeled segments of one Liotro Ruby Red orange
Feathery pieces of endive
Finely shredded spring onion

Method

Dust the chicken portions first with seasoned flour, and then dip into beaten egg and coat evenly with breadcrumbs. Heat the butter and oil in a large shallow frying pan; add the prepared chicken breasts and cook for about five to six minutes on either side. Meanwhile, make the sauce by mixing all the sauce ingredients together. Drain the cooked chicken on absorbent paper and arrange on a serving platter. Spoon the sauce along the centre of the chicken and garnish with orange segments, feathery pieces of endive and strips of spring onions.



Congratulations to Zelda Bradley who won Sales Assistant of the Year in the 1999 Lloydspharmacy awards. Zelda who works at the Barnstable branch in Devon, is pictured receiving her award from Michael Ward (left), chief executive of Gehe UK, and Peter Hinckley, sales director at SmithKline Beecham

Start clockwatching with Lemsip lozenges



Winter is almost upon us with its long winter evenings and a stream of customers wanting treatments for their cold or flu symptoms. To help you keep track of time during the day in the pharmacy, Lemsip has come up with a special offer for *OTC* readers.



A sore throat is often the first sign of an impending cold and many customers buy sore throat lozenges at the same time as a cold and flu treatment. Lemsip, one of the leading brands in the cold and flu market has introduced Sore Throat Anti-bacterial Lozenges to its Lemsip range, offering customers effective products for all stages of their cold.

To cheer you up on the cold wintry days Lemsip is giving away 50 bright yellow Sore Throat anti-bacterial lozenge clocks. To take part in this reader offer simply send your name and address on a postcard to: Teamwork Handling, 5 Chessington Park, Dunnington, York YO19 5SE by December 31, 1999. The first 50 names out of the bag after this date will be the lucky winners of a clock.

(Lemsip Sore Throat Anti-bacterial Lozenges contain Hexylresorcinol. Lemsip and the Sword & Circle symbol are trademarks)



Congratulations to Ellen Shacklock who won Dispenser of the Year in the 1999 Lloydspharmacy awards. Ellen who works at the Entfield branch in Middlesex is pictured here receiving her award from Michael Ward (left), chief executive of Gehe UK, and Peter Hinckley, sales director at SmithKline Beecham



Pharmacy assistant Celia Hillier is a very fitting winner of a prize in the Thornton & Ross competition to find the Care Assistant of 1999 as she works at Care Chemists, 31 The Broadway in London. Celia, winner of the third in a series of competitions, is pictured receiving her prize of an electronic personal organiser from Alan Martin of Thornton & Ross. Entry forms for the fourth and final competition can be found in this issue of *OTC*. If the entry form is missing contact your local Thornton & Ross sales representative or phone the company directly on 01484 842217



New name, new look for Moss

Moss Chemists changed its name to Moss Pharmacy last month. The chain will be rebranding its 620 UK stores in the coming year and introducing four different trading formats to suit different types of location and customer profile.

Moss' new high street identity picks up its colours from the new Alliance UniChem logo launched earlier this year. It claims to represent the three core business values that drive the company by incorporating:

- A cross: the recognised symbol of pharmacy
- A capsule: expertise in the dispensing of healthcare
- A heart: a caring presence within the local community.

The new image will be carried through into the interior fittings, where the capsule shape will be picked up in window poster frames, signage and end-of-gondola shelving for special offers.

In the past eight years the number of Moss stores has grown from 90 to over 620. Sales now stand at over £400 million a year, and a focus on healthcare means that 87 per cent of sales are in prescriptions and OTC medicines.

Helping parents cope with sick children

Action for Sick Children, the charity supported by Tixylix and Tixymol children's medicines, has launched a new series of leaflets to advise parents about getting the best healthcare service for their children.

The leaflets, which are being distributed to pharmacies by Novartis, cover topics such as what to do in an emergency, helping children cope with needles and what to expect when a child goes into hospital.

Pharmacists needing extra copies should contact their Novartis representative or call the company on 01403 210211.

New research by the charity reveals that mothers thought their opinions were dismissed too lightly by GPs. They were unhappy about the speed with which they could be seen in an emergency and the fact that doctors on night-call may not have access to the child's medical records.

Action for Sick Children.

Tel: 020 8542 4848.



Showcase

with Sarah Purcell, Neutrogena Beauty Writer of the Year



The best opportunity to quit

If you've been waiting for the right time to give up smoking then January 1, 2000, has to be the best opportunity you'll ever get. Manufacturers of smoking cessation products have realised its potential and are investing heavily in advertising and new products to persuade smokers to quit in the New Year. SmithKline Beecham is investing £10m in a new campaign to support Niquitin CQ – the company believes we'll see a record number of quit attempts on January 1. Novartis is similarly convinced – the company is putting £5m behind

its Nicotinell NRT range and has recently launched a lozenge product, which it believes will take 10 per cent of the smoking cessation market by the end of next year. Nicobrevin Gum has been launched to complement the Nicobrevin 28 Day Capsule Course. So now is the time to swot up on smoking cessation to prepare for the New Year rush



Anadin innovates with Ultra launch

New Anadin Ultra is described by Whitehall Laboratories as an 'innovation in OTC analgesics'.

Anadin Ultra is an easy to swallow, turquoise soft gelatin capsule containing 200mg ibuprofen as a solution. This liquid formulation allows the analgesic to be absorbed into the bloodstream faster than ordinary ibuprofen tablets, justifying the strapline 'To beat pain fast'.

Anadin Ultra, a GSL product, is available as a 16 capsule pack retailing at £2.59. A four capsule pack, retailing at £0.75 will be available for an initial six month period to encourage trial of the product.

The eye-catching packaging retains the familiar Anadin yellow. Whitehall Laboratories Ltd. Tel: 01628 669011.

New Throaties last longer

Jacksons is launching new, larger Throaties pastilles, which last longer to bring improved relief from sore throats.



The company says it is meeting the demands of the many consumers who prefer soft and soothing throat pastilles to hard lozenges and who also say they would like a larger pastille.

Throaties come in three flavours and are presented in flow-wrapped blisters containing ten pastilles

(£0.59) or cartons of 20 (£1.18). Ernest Jackson & Co Ltd. Tel: 01363 772251.



Strepsils enters cough market

Crookes Healthcare is entering the pharmacy cough sector with the launch of Strepsils Cough Lozenges.

Intended for dry, tickly coughs in adults and children over six years, each blackcurrant-flavoured lozenge contains 2.5mg of dextromethorphan hydrobromide. The strength of the lozenge should allow more frequent dosing.

Strepsils Cough Lozenges retail at £2.49 for 24 and £0.49 for the trial size.

PoS material includes a counter unit. Crookes Healthcare Ltd. Tel: 0115 953 9922.

New lozenge from Nicotinell

New to the Nicotinell range of smoking cessation products is a lozenge presentation.

Each mint flavoured lozenge contains 1mg of nicotine, yet because of its particular formulation, provides the same level of nicotine as 2mg Nicotinell Gum.



Novartis says the sugar-free, fast-acting lozenge is a discreet alternative to gum.

Nicotinell Lozenges are available in packs of 12, 36 and 96, retailing at £2.99, £7.49 and £15.99 respectively.

A £2.5m support campaign includes TV, press and radio. Novartis Consumer Health. Tel: 01403 210211.

First fizzy fibre from Califig

Califig Effervescent, which is the first effervescent fibre product on the market

The new product, which has an orchard fruits flavour, contains inulin, a soluble dietary fibre derived from artichoke root. This has a dual action, drawing water into the intestine to soften the stool and helping to form bulk to increase the weight of the stool and aid movement.

Califig Effervescent is presented in tubes of ten, retailing at £1.95.

Merck plans to put £250,000 behind a promotional campaign for the Califig range. Seven Seas. Tel: 01482 702878.



10 MINUTES AGO THE WILSONS DISCOVERED THEY HAD HEAD LICE.



It only takes 10 minutes to treat head lice effectively with Lyclear. Yet it's gentle, pleasant smelling and easy to use. As well as single packs, Lyclear is now available in twin packs so two people can be treated. Which is bad news for head lice but good news for families.



Effective head lice treatment
Quick and easy to use
3 X Creme Rinse & comb

Permethrin

presentation: 1% permethrin in an orange creme rinse base. **Uses:** Treatment of head lice infestations. **Dosage and administration:** Adults and children over 6 months: wash, rinse and towel-dry hair. Apply enough Lyclear Creme Rinse to saturate the hair and scalp, leave for 10 minutes then rinse. **Contra-indications:** Hypersensitivity. **Pregnancy and lacta-**

tion: Under medical supervision. **Side effects:** Generally well-tolerated, rarely scalp irritation. **Price (ex VAT):** 59ml £3.23. 2x59ml £5.95. **Legal category:** P. **Further information:** Warner Lambert Consumer Healthcare, Chestnut Avenue, Eastleigh SO53 3ZQ. **Product licence number:** 15513/0019. **Date of preparation:** May 1999.



Cold comfort for Anadin

Anadin has branched into the cold and 'flu market with two new products: Anadin Cold Control Capsules and Anadin Cold Control Flu Strength Hot Lemon Powders.

Each capsule of Anadin Cold Control (16 capsules, £2.59) contains paracetamol 300mg, caffeine 25mg and phenylephrine hydrochloride 5mg. One to two capsules should be taken every 4-6 hours up to a maximum of 8 capsules in any 24 hours.

Anadin Cold Control Flu Strength Hot Lemon Powders (5 sachets, £2.55) come as sachets containing paracetamol 1000mg and phenylephrine hydrochloride 10mg. The contents of one sachet should be dissolved in hot water and drunk. Up to four sachets can be taken in any 24 hours. Both products carry GSL licences.

A print and broadcast advertising campaign is planned for the new Anadin Cold Control range in the peak cold and 'flu season. PoS material is also available. Whitehall Laboratories Ltd. Tel: 01628 669011.

Full Marks for all the family

SSL International is introducing its Full Marks Lotion in a new 200ml family treatment size, which retails at £9.25.

The new pack, which is for up to four people, replaces the 160ml size. The change is designed to simplify the company's range of head lice treatments. SSL International plc. Tel: 0161 654 3000.

Tea Tree joins the Care range

Thornton & Ross is extending its Care range with 100 per cent tea tree oil.

Presented in a 10ml amber bottle with an integral dropper unit, Care Tea Tree Oil retails at £3.49. The oil is packaged in a green carton, with directions for use on the back and a consumer leaflet inside giving guidelines on using the product. Thornton & Ross. Tel: 01484 842217.



New Zovirax formulation

Zovirax cold sore cream has a new formulation which is easier to rub in and turns from white to clear more quickly, says Glaxo Wellcome.

The addition of dimethicone enables the cream to be rubbed in four times more quickly than the original.

The launch is backed by a £2 million media campaign, including national television advertising which runs from until mid-December, then again in January.

The Cold Sore Information Bureau provides information for cold sore sufferers and medicines counter assistants (35 Red Lion Square, London WC1R 4SG. Tel: 0845 603 0052). Glaxo Wellcome UK Ltd. Tel: 020 8990 9000.

Medised goes for the baby boomers

A new Infant variant has been added to the Medised children's cold relief range from SSL International.

Medised Infant is formulated for babies from three months old and brings relief from colds, pain and fever and helps restore restful sleep.

The dual-action formula contains diphenhydramine to help dry up a runny nose and paracetamol to relieve pain and fever. It has a strawberry flavour and is colour and sugar-free.

Medised Infant retails at £2.99 for 100ml and joins the existing variants, Medised Original and Medised Sugar Free Colour Free for children aged one and over. All are available in childproof bottles. SSL International. Tel: 0161 654 3000.



Become breast aware with Sensability

Becton Dickinson has launched a new product designed to help women examine their breasts more easily and effectively.

BD Sensability is a reusable, ultra-thin, soft plastic pad, which is placed over the breast during self-examination. Its two layers have a small amount of liquid lubricant sealed between them to enhance the sense of touch and allow the fingers to glide easily over the breast,

leaving the user free to concentrate on any changes which may be felt.

As part of a complete breast awareness educational programme, the BD Sensability Kit (£19.95) comes complete with an instructional video and an educational leaflet.

BD UK Ltd. Tel: 01865 748844.



Freeze out warts and verrucas

Wartner is a new, one-stop treatment for warts and verrucas that works in a similar way to liquid nitrogen.

The Wartner pack (£9.95) comprises an aerosol spray containing dimethyl ether and propane and a pack of sponge applicators. A leaflet gives instructions for use.

The applicator is saturated with the dimethyl ether and then placed on the wart or verruca for a maximum of 20 seconds to freeze it. A slight stinging sensation is felt, but this disappears quickly.

A blister then forms and after about ten days the frozen skin, complete with wart or verruca, falls off. New skin will have formed under the blister. If necessary, the treatment may be repeated after ten days, but Wartner should not be used on the same site more than three times.

The product, which is made in The Netherlands, should not be used on children under four. Passion for Life. Tel: 020 8964 9944.



A new look and new products for Healthcrafts

Peter Black Healthcare has relaunched its Healthcrafts range of vitamins and minerals with new packaging and three extra products: St John's wort, echinacea and selenium.

St John's wort is a herb said to help elevate mood and can be beneficial in seasonal affective disorder. Both echinacea and selenium benefit the immune system.

The new look packaging features a gold cap and icon pictures, which focus on the source of the vitamin/mineral that have been used.

Each pack also contains a leaflet which provides healthy living information in a question and answer format. PBH has set up a Healthcrafts nutritional advice line to answer consumers' queries. Peter Black Healthcare. Tel: 01283 228300.

Natural relief during childbirth

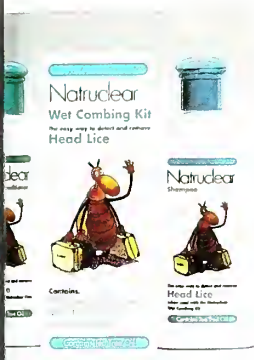
Nelsons has provided National Childbirth Trust regional advisers with a 'labour kit' containing a range of complementary treatments designed to make labour easier to bear.

The kit includes Bach Walnut Flower Remedy, Bach Rescue Remedy, Nelsons Arnica 30c, Nelsons Nux Vomica 6c and Nelson & Russell Rose Water Spritz. A. Nelson & Co Ltd. Tel: 0800 289515.

Natruclear lice detection kit

New from SSL is Natruclear, a wet combing kit designed to detect head lice.

The Natruclear Wet Combing Kit contains Natruclear Conditioner with tea tree oil, which has an antiseptic action; a fine toothed metal comb and an instruction booklet showing how to wet comb for headlice. Natruclear Tea Tree Shampoo is also available and customers are able to buy each item separately if they wish.



SSL says the range offers a straightforward Stage One recommendation when wet combing is Health Authority policy or where customers prefer this method. Once lice are found, licensed chemical treatment, such as those based on malathion, pyrethroids and carbaryl, are the only effective and reliable treatments.

The Natruclear packaging features a cartoon louse and SSL is supporting the launch with a pharmacy direct mail campaign, pharmacy staff competition and PoS material including display trays and door stickers.

The Natruclear Wet Combing Kit retails at £5.99 and the shampoo and conditioner at £3.50 each for 250ml. The Natruclear comb (£2.99) will replace the Seton Nit Comb when stocks are exhausted. SSL International. Tel: 0161 654 3000.



Spray on a second skin

Scholl has introduced a new spray-on blister treatment to its footcare range.

Scholl Blister Treatment Spray (100ml, £3.79) can be used to build up a second skin either to protect a blister that has formed or to help prevent a blister developing.

The spray contains a polymer dissolved in volatile cyclohexane and the propellant dimethylether. When applied in ten short bursts of spray, the water proof polymer skin builds up quickly giving a cooling, pain-relieving sensation at the same time. Pain relief continues as the second skin covers nerve endings, mimicking undamaged skin, says Scholl.

The contents of a 100ml can should be sufficient for at least 200 bursts of spray, the equivalent of 20 plasters. SSL international. Tel: 0161 654 3000.

Earcalm for superficial ear infection

Earcalm is the first over the counter ear spray for the treatment of superficial ear infections of the external auditory canal.

Earcalm contains 2 per cent acetic acid in a 5ml spray (£6.38). Acetic acid, which works by restoring and maintaining normal acidity in the ear canal, has been clinically proven to be an effective antibacterial and antifungal agent. Its availability over the

counter (P licence) means patients can self-medicate early, reducing the risk of the infection progressing. Earcalm can also be prescribed on the NHS.

The spray can be used for the symptoms of superficial ear infection which includes include itchy ear, pain within the ear, occasional slight discharge and slight fullness of the ear. One metered dose spray (60mg) should be administered to each ear three times a day, maximum one spray every 2-3 hours.

Treatment should be continued for two days after symptoms have cleared, but not for longer than seven days.

Stafford-Miller Ltd. Tel: 01707 331001.



Centrum targets children with Junior formula

Centrum is targeting the children's market with Centrum Junior, a multivitamin and mineral formulated for children aged four to ten.

Centrum Junior is a one-a-day chewable tablet with 24 important nutrients based on UK Reference Nutrient Intakes, including vitamins A, B12, C and D, calcium, magnesium, phosphorus, folic acid and iron.

In tubs of 30, Centrum Junior retails at £4.99, and the tablets, which are suitable for diabetics, are free from sucrose, lactose, gluten, wheat and yeast.

Whitehall Laboratories says the



children's vitamin sector is valued at £11.2m and accounts for 15.4 per cent of the total multivitamin category, but it believes it is undervalued because many children's products do not offer complete formulations and do not taste good. Whitehall Laboratories. Tel: 01628 669011.

Advancing the cause of first aid

Smith & Nephew is relaunching its advanced first aid range with the aim of maintaining leadership of the sector.

The relaunch gives the range strong new packaging, a rationalisation of branding and new product sizes, all aimed at simplifying consumer selection.

The range capitalises on customer awareness of the Melolin and Opsite names by bringing in new products. The range now includes three Opsite products – waterproof film dressings, waterproof dressings and spray on dressing. There are two Melolin products – cushioned dressing pads and adhesive dressings – plus Jelonet for burns and four bandaging products.

The company is supporting the relaunch with national press advertising, promotion and PR support to drive pharmacy sales. Smith & Nephew. Tel: 01482 222200.

Kava Kava joins the Kira range

Kava Kava, a member of the pepper family, has been relaxing South Sea islanders for

centuries, is now part of the Kira St John's wort range.

Research suggests it can help promote a sense of calm for body and mind immediately and without side effects.

Kira's Kava Kava, in packs of 30, retail at £14.99. Chemist Brokers. Tel: 023 9222 2500.

A new VMS range from UniChem

UniChem launches a new VMS range with 19 products designed to meet the needs of pharmacists and consumers.

The range is the first to carry the new UniChem logo and comprises colour-coded groups of products to meet specific needs such as women's health or healthy heart.

Vicki Martin, UniChem's own-brand manager, says: "There are excellent price deals and products no longer need to be bought in bulk, so pharmacists can buy the right amount of products to suit their demand."

The new range includes multivitamins, cod liver oil, evening primrose, folic acid and garlic capsules and retail prices start at £1.49.



PoS material supports the range and, to coincide with the launch, a competition in UniChem's consumer magazine *Healthy Times* gives readers a chance to win a weekend at a health spa. UniChem. Tel: 020 8391 2323.



Double header from Lyclear

Warner-Lambert has launched a twinpack of Lyclear Creme Rinse, the permethrin-based headlice treatment.

The pack, which offers cost savings to the consumer, includes two applications. It is aimed at those who need to treat two members of the family, or for those who need a second application after seven days.

Information on the pack highlights Lyclear's effectiveness and ease of use. It also contains a fine-toothed detection comb and a patient information leaflet.

The launch is the first of a

series of pharmacy initiatives for Lyclear, which aim to increase education and awareness of headlice and help grow pharmacy sales. Other initiatives to follow later in the year include a new consumer leaflet, further editions of the 'Licelines' newsletter and a research report.

Warner-Lambert Consumer Healthcare.
Tel: 01703 623678.

Natural help for dry scalp conditions

Procam Shampoo and Scalp Solution were developed by the founder of Irish Skincare Products, Armie Stevenson, who wanted to find cortisone-free products to help his grandson's eczema.

The products, on sale in Ireland since 1997, are now being launched in the UK.

Procam contains a blend of Western and Chinese herbs to help control symptoms associated with dry scalp, such as eczema and psoriasis.

The shampoo cleanses and conditions the hair and, used regularly in conjunction with Procam Scalp Lotion, prevents dryness and keeps the skin of the scalp soft and

supple. The scalp lotion may be used without washing and two applications per day are recommended.

Procam Shampoo retails at £6.99 for 200ml and the Scalp Lotion at £9.99 for 100ml.

Irish Skincare.

Tel: 00 353 503 41913.



New sugar-free Mac

Mac has been repackaged into flow-wrapped blisters, with an introductory price to consumers of £0.69.

A new variant has been added, so there are now three flavours in the range.

New Mac Sugar Free Lozenges contain antiseptic and antibacterial dequalinium chloride. The existing dual action flavours – Honey, Lemon and Blackcurrant – contain hexylresorcinol, which has an antiseptic action to combat the bacteria that cause sore throats, and a local anaesthetic to relieve pain.

Ernest Jackson & Co Ltd.
Tel: 01363 772251.



Eye-catching new look for Brolene

Brolene Eye Drops and Ointment have a brand new look.

While product formulations are unchanged, the packaging now features a more modern eye motif

and uses silver on a white background.

Brolene, for bacterial conjunctivitis, styes and blepharitis, commands 80 per cent of the anti-infective eye category and both the drops and ointment are suitable for children. The active ingredients are propamidine isethionate in the drops and dibromopropamidine isethionate in the ointment.

The drops retail at £3.95 for 10ml and the ointment at £4.15 for 5g.

Rhône-Poulenc Rorer.
Tel: 01732 584000.



Something for smokers to chew on

Cedar Health is launching a new gum in its Nicobrevin range to help with the habitual aspect of giving up smoking.

Each piece of gum contains 30mg vitamin C (50 per cent RDA), 50mg camomile and 50mg passiflora. Camomile and passiflora are traditionally thought to have calming, anxiety-relieving properties.

For maximum effectiveness, Cedar Health recommends that the gum should be used in conjunction with the Nicobrevin 28-day nicotine-free capsule course.

Each pack of gum contains ten pieces and retails at £2.45. A free counter display unit is available with the first case of Nicobrevin Gum.

Cedar Health.
Tel: 0161 483 1235.

Itch relief from E45

New E45 Itch Relief Cream has a dual-action formula, with lauro-macrogols and urea, to rehydrate dry, irritated skin and soothe the itch.

Crookes Healthcare says the new cream offers rapid relief from the itch of eczema and can also be used to treat pruritis, dermatitis and scaling skin conditions. It should be applied twice a day.

E45 Itch Relief Cream is in 50g tubes and retails at £3.29.

Crookes Healthcare.
Tel: 0115 953 9922.

The quick-to-type

Active young man, lives life in the fast lane, seeks something special. Help me feel better straight away. Act fast, no time wasters please.

Further information is available from Crookes Healthcare Limited, Nottingham NG2 3AA. Nurolfen Advance: Legal category [P]



www.nurofen.com





Safe & Sound hair conditioning

Paul Murray has added Tea Tree Conditioner to its Safe & Sound range.

The conditioner complements Safe & Sound Tea Tree Shampoo and can be used on all hair types. It is formulated with antiseptic tea tree oil to help prevent dandruff, reduce static build-up, maintain moisture balance and leave the hair soft, shiny and manageable.

The conditioner (250ml, £2.49) is aimed at schoolchildren and can be used in conjunction with a nit comb to help detect headlice before treatment with an insecticide-based lotion or shampoo.

A display unit, available at a trade price of £44.82, contains 12 bottles of Tea Tree Shampoo and six Conditioner.

Paul Murray plc.
Tel: 01703 268444.



Total Care for teeth from Sensodyne

Stafford-Miller is relaunching Sensodyne F and Gel as Sensodyne Total Care.

The company says the move is designed to emphasise that Sensodyne Total Care does all that a normal toothpaste does, including fighting gum disease, preventing tooth decay and cleaning effectively, as well as relieving the pain of sensitive teeth.

The relaunch is being promoted with a £1m national TV campaign that runs week on week off until December, women's press advertising and a direct mail campaign to known

sufferers of sensitive teeth. Price marked packs aim to encourage trial.

Stafford-Miller.
Tel: 01707 331001.



Flex Direct gets Triple Action

The Aquafresh Flex toothbrush range is being upgraded with the introduction of the Flex Direct Triple Action (£2.49), featuring cross angled bristles, which actively clean between the teeth.

Manufacturer SmithKline Beecham says that research has shown consumers prefer cross angled bristles to flat or interdental cut, and the new brush is expected to encourage trade up from the base brand.

The Triple Action variant will be positioned in the middle of the range, with the recently launched Flex Tip remaining in the premium position.

SmithKline Beecham Consumer Healthcare.
Tel: 020 8560 5151.

Time for a brush with the Elite

Stafford-Miller promises greater cleaning power with every stroke for users of its new Sensodyne Elite toothbrush.

The company says the new brush represents "a major development in toothbrush design", offering greater cleaning power with every stroke, so lessening the likelihood of gum recession due to over-vigorous brushing.

The three key elements of the Sensodyne Elite (£2.49) are Active Bristle Profile, which is designed to clean more efficiently so excessive pressure is not needed; a patented head design with more bristles per tuft to give effective cleaning; and "breakthrough bristle technology" to remove plaque more effectively.

The new brush is available in six colours and two head



sizes and the holographic packaging gives a premium feel and maximum on-shelf impact.

Stafford-Miller.
Tel: 01707 331001.

Sonic technology for teeth

Optiva UK has launched a new model in its sonicare range of sonic toothbrushes.

The new sonicare plus combines 31,000 brush strokes per minute and gentle sonic waves with features such as the unique 'easy start' option, 'quadpacer', 'smartimer' and ergonomic non-slip grip handle.

Sonicare has been clinically proven to remove over 80 per cent of coffee, tea and tobacco stains in four

weeks and removes nearly twice as much interproximal plaque than manual brushing, as well as being gentle on gums and sensitive teeth. The fluid streaming effect by the brush helps 'flush' bacteria from between teeth and the aerated bubbles have a deleterious effect on anaerobic bacteria.

The 'easy-start' feature helps new users get accustomed to the sensation of power brushing by automatically increasing the brushing power from 50 per cent to full power over the first 12 brushings. The 'quadpacer' beeps automatically in 30-second intervals to encourage the user to brush each quadrant of the mouth thoroughly and the 'smartimer' has a two-minute automatic shut-off, the length of brushing time recommended by dentists.

Retailing at £129.50, the new sonicare plus comes complete with three interchangeable, colour-coded heads and compact charger which provides up to two weeks brushing from a single charge. It also comes with a two year limited warranty, 90-day better check-up guarantee and 30-day money-back guarantee.

Optiva UK Ltd.
Tel: 0181 817 1060.

The strong powerful type

Tough nut to crack. Needs the strength to help get over a painful time. Must be something special. Please help! Don't let me down.



www.nurofen.com



Further information is available from Crookes Healthcare Limited, Nottingham NG2 3AA. Nurofen Plus. Legal category [P]



Fuji plans millennium photofest

Fuji aims to boost sales over the Christmas and millennium with special offers on film and cameras.

Festive photographers will get more exposures for their money, with 35-exposure Fujicolour Superia 200 and Multi 400 films for the price of a 24-exposure and 40-exposure Nexia 200 and Multi 400 for the price of a 25-exposure film.

The film packs also feature an instant win promotion with prizes including four Toyota Picnic people carriers, Apple Mac computers, mobile phones and cameras. Counter display units, posters and showcards highlight the promotion, which will also be reinforced with a £600,000 burst of TV advertising for Multi film.

Party photography is targeted with the Big Party packs of three 24-exposure Fujicolour Superia Multi 400 at half price and £1 off the Fujifilm Quicksnap 800 single use camera, which also has an instant win champagne promotion. An on-pack competition on the Flash Car Quicksnap instant use camera gives children a chance to win £150 towards a party of their own. Fuji Photo Film (UK) Ltd. Tel: 020 7586 5900.

String opens new market for Bodyform

The Bodyform fempro range has been relaunched and claims a world first with Bodyform String, a pantyliner to be worn with G-string underwear.

The whole brand has been repackaged, with improved

colour coding, a revised 'drop system' and better product illustrations.

Other innovations include two new pantyliners, improved Bodyform Towels and a branded website, all supported by a £7m marketing package.

Bodyform String was launched to cater for the increasing number of women wearing G-string underwear and the new pantyliners are the right length, width and thickness for comfort, while the shape and fastening means they stay in place.



The new pantyliners are Bodyform Active, with a two-core system to cope with moisture and keep skin fresh, and Bodyform Air, with a perforated backing sheet which allows skin to breathe.

Bodyform Towels now have a textile-like surface material, with holes to propel the liquid through to the absorbent core. SCA Hygiene Products. Tel: 01322 303057.



Avent helps protect mums from breastfeeding pain

New Avent Nipple Protectors represent a rethink in nipple shield design, says manufacturer Cannon Rubber.

The new nipple shield features two cutaway areas which leave a distinct

butterfly shape, allowing the baby's nose and cheek or chin to be in contact with the mother's breast during feeding.

In Avent's own trials, a significant number of mothers said the new design resulted in increased milk flow and better contact with the baby. It also fitted comfortably and provided excellent protection.

The Avent Nipple Protector comes in a clear polystyrene box and retails at £3.99 for two. Cannon Rubber Ltd. Tel: 01787 267000.

A natural extension for Numark haircare

Numark says its new own-brand Tea Tree Shampoo and Conditioner respond to consumer demand for natural ingredients.

The launch is being supported with regional PR, featuring a freephone number to help readers find their nearest Numark pharmacy.

The shampoo is presented in a 300ml bottle and the conditioner in a 250ml pump action dispenser to aid wet combing. Both retail at £1.49.

The launch is part of Numark's Risk Free Trial Programme, where each shareholder receives a case of the new product and any left unsold after three months can be returned for credit.

Numark is also relaunching its 100 per cent Money Back Guarantee scheme designed to encourage customers to try products from the own-brand range, and it is supporting the relaunch with eye-catching PoS material. The scheme covers all products except medical lines. Numark. Tel: 01827 69269.



Junior Macare is a soft touch for Christmas

Eleven new toys form the Junior Macare Christmas Millennium Collection from Paul Murray.

The new range consists of backpacks, waist bags, animal wrist purses, puppets, beanies, large honey toys, shaggy patch toys, cosy cubs and large and small animal toys in a variety of designs including frogs, bears, pigs, pandas, koalas, monkeys, ducks, rabbits and moles. The toys are made from high quality acrylic plush terry towelling and velboa velour and retail at prices ranging from £1.99 to £9.99.

Paul Murray plc. Tel: 023 8026 8444.

Team spirit for Adidas toiletries

Coty is launching a fifth variant in its Adidas male toiletries range.

Adidas Team is a masculine, modern fougere fragrance with top notes of fresh grapefruit and aromatic juniper berry. It has citrus middle notes and a dry, woody base.

A 50ml aftershave retails at £5.95. The fragrance is also available in body spray deodorant, anti-perspirant deodorant and shower gel, which all retail at £2.49. Coty (UK) Ltd. Tel: 020 8971 1300.

Precious metals from Miners

Miners International is introducing a new range of shimmering metallic eye shadows.

Megadust Supashine Eye Shadow is available in six shades - Pearl Shine, Silver Sparkle, Golden Glow, Naked Flash, Cinnamon Sheen and Graphite

Glimmer. Retail price is **£2.49**.

Miners is also launching Lip Pout - a clear, roll-on lip gloss formulated to protect the lips as well as giving lustrous shine. Packaged in a frosted tube, the product retails at **£1.99**.

Miners International.
Tel: 01264 325500.

New look for Strepsils

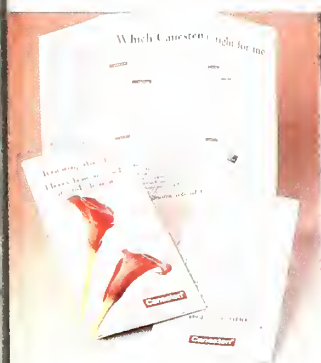
Crookes Healthcare has given its core Strepsils range a modern new look.

The 'TV screen' border, which has featured on the pack for 40 years, has been replaced with a 'corner' design and clear product benefits are highlighted on the front of the pack. Crookes says the new look is designed to make life easier, so pharmacists and their assistants can be confident they are recommending the most suitable product variant.



The repackaging applies to Original, Honey & Lemon, Vitamin C, Menthol & Eucalyptus and Sugar Free Strepsils.

Crookes Healthcare.
Tel: 0115 953 9922.



Canesten relieves the itch for information

A new consumer information leaflet from Bayer tackles the most commonly asked questions about thrush, offers practical solutions and highlights the role of the pharmacist.

The leaflet clearly outlines the Canesten product range, including the latest additions - Canesten Once and Canesten Thrush Cream -

showing when and how each product should be used.

The importance of letting the pharmacist know if there is a possibility of pregnancy when asking for thrush treatments is highlighted, following research which showed more than 75 per cent of women fail to fully consider this aspect when seeking an OTC product.

The new leaflet is also being distributed through GP surgeries, the Canesten Women's Health Advice Line and the Canesten web site. Copies are available from Ceuta Healthcare on 01202 780558. Bayer Consumer Care.
Tel: 01635 563000.



Feldene targets arthritis sufferers

Pfizer is targeting potential arthritis sufferers with a campaign promoting Feldene P Gel to the over-50s.

The campaign of promotions and editorial features runs until Christmas and will be featured in titles such as *Active Life*, *Golden Days* and *Golden Times*. The features give tips on exercising with arthritis and offer readers the chance to win a video cassette recorder with an Exercise With Arthritis video and a Feldene P Gel sports bag.

An estimated 20 million Britons suffer from arthritis, with the likelihood of developing the condition increasing with age. Pfizer Consumer Healthcare.
Tel: 01420 84801.

Intima promises 'new sensations'

Sutherland Health has launched Intima, a vaginal lubricant, 'designed to enhance sexual pleasure and bring new sensations during lovemaking', it says.

Intima is water-based so will not damage condoms. Sutherland says Intima has a smooth and silky texture,

complementing the natural vaginal moisture.

The launch price for six 100g tubes is **£13.90** (normally **£21.27**), with a promotional retail price of **£4.95** per pack (usual price **£5.95**). Sutherland Health Ltd.
Tel: 0800 389 8057.

SB invests £10m to help quitters through the millennium

SmithKline Beecham aims to help make it a smoke-free millennium with a £10 million campaign in support of Niquitin CQ.

The marketing support programme includes a £5m spend on TV, plus additional print advertising. A pharmacy press campaign continues until March.

Consumer print ads in national newspapers and magazines roll out in mid-November and continue until January, while the TV campaign starts in mid-December and goes on until March to help quitters through the first few crucial months. Both campaigns acknowledge that giving up is difficult.

Supporting the advertising is a consumer PR campaign along with educational advertising and promotions



for pharmacists focusing on the benefits of Niquitin CQ and the Committed Quitters Stop Smoking Plan.

Pharmacy PoS material includes banners, leaflets and dispensers, plus giant packs for window displays.

Elizabeth Denny, senior product manager for SB, says: "We believe that the new millennium could signify a record number of quit attempts. Our £10m marketing commitment is there to ensure that we drive these committed quitters into the pharmacy for advice and that the pharmacist has everything that he or she needs to offer these potential quitters their best chance yet to become ex-smokers." SmithKline Beecham Consumer Healthcare.
Tel: 0181 560 5151.

The steady persistent type

Hard-working female needs something special. Only a long-lasting relationship will do. Must be able to keep going for up to 12 hours at a time.



www.nurofen.com



Further information is available from Crookes Healthcare Limited, Nottingham NG2 3AA. Nurofen Long Lasting. Legal category (P)



With the looks of an angel, our cover girl this month is pharmacy assistant Angelina Coxon. In July this year we invited the readers of OTC to enter the third annual OTC/Miners Model Assistant Make-over. Read on to find out more about our winner and her day in the studio

Sifting through photographs is not a very scientific way to pick a cover girl, yet for the third year in a row, OTC and Miners Cosmetics have found a gem.

As in previous years, the standard of entries was very high and the three judges, Stewart Chambers from Miners Cosmetics, Tony Lambart editor at OTC and Maria Murray, spent a lively few hours narrowing the selection down to the finalists, and eventually to an overall winner.

Seventeen-year-old Angelina Coxon, from Blyth in Northumberland, is the 1999 winner of OTC/Miners Cosmetics Model make-over competition. Angelina, who works part-time at Lloydspharmacy in Blyth, has worked Saturdays and school holidays at the pharmacy for the past two years, and is also studying business for two years at sixth form college.

Last month, Angelina travelled down from Northumberland to London with her friend Sarah to take part in our fashion shoot. After settling in to their room at the Stakis Hotel in Islington, the two set off to do some serious shopping – straight over to Harrods in Knightsbridge. After a hectic day in the West End it was back to North London.

That evening, Angelina and Sarah were joined by Elisa

Looks like an angel

Mirra, the press officer for Miners Cosmetics, Tony Lamb and Maria Murray, and it was off to Lola's restaurant on Upper Street for a delicious meal, courtesy of Miners. Elisa presented Angelina with a bottle of champagne which she wisely decided not to open as it was an early start the next morning.

On Friday morning the girls were chauffeured to the Curtain Road studios in Hoxton where our team was waiting to start work.

While Angelina and Sarah had a cup of coffee, Miners make-up artist Caroline Donnelly, hair stylist Carlos Ferraz and photographer Ryan Davies sat down with Tony to create three contemporary looks for our model.

For our cover shot, Carlos drew Angelina's hair back from her face and Caroline set to work using the latest colours from the Miners range to highlight Angelina's natural beauty.

Caroline won the Miners Make-up Artist of the year award two years ago and her prize included a course at the London College of Fashion which she completed this year.

If you want to see Caroline in action with Miners make-up she'll be at the Clothes Show Live at the NEC in Birmingham in December.

As she blended eyeshadows and lip colours, Caroline explained to Angelina how to

gradually build up layers of colour to produce the flawless finish you see on the cover of this issue. Her advice will come in useful as Angelina also received £100 of Miners Cosmetics which she can use to recreate these stunning looks at home.

Carlos, who has worked with stars such as Gwyneth Paltrow and Kylie Minogue, was delighted when he saw Angelina's naturally curly hair.

For our cover shot he drew her hair back and twisted it flat against her head – a simple, yet effective style that focused attention on Angelina's features.

For our second set of pictures, Carlos styled the natural curls into ringlets which formed a natural frame for Angelina's face. You can judge for yourself how Angelina looked by turning to our fragrance feature on page 18.

With only a brief break for lunch, it was a long and tiring day but the end results speak for themselves. Angelina will also be appearing in the first two issues of 2000, so keep an eye out for her.

At the end of the shoot we had a wonderful selection of pictures to use in OTC, but the most important aspect of the day for us was that Angelina enjoyed herself. And she'll certainly be able to offer a few tips to customers who want a new look for the millennium.



Carlos gets to work with his curling tongs



Caroline applies the finishing touches



Treated like royalty: the day begins for Angelina as her chauffeur delivers her to the studio



£100 worth of Miners Cosmetics for Angelina from press officer Elisa (left) watched by Caroline

So many colours in the rainbow

Major cosmetics companies are realising what most of us have known for years – skin comes in a range of colours. Anne Mullee celebrates the change

The cosmetic industry can be unfair, creating a bias in its products and depriving a proportion of women from the guilty pleasure of splashing out on loads of new make-up during a shopping binge. If you're black or Asian, or your skin doesn't fall into the conventional category of white, you may well have found this true of many mainstream companies, who have neglected to provide a broad enough range of make-up for women of every colour.

Happily, the past few years have seen a turnaround in attitudes and the UK is finally well on the way to enjoying the vast range of goodies already available to our American sisters. The tide is turning with the recognition of this country's black and Asian communities which, though a minority, demand the same choice as white consumers. Black models are finally being chosen to represent the 'face' of some companies – Tyra Banks for Cover Girl, for example – and smart thinking US companies are extending their ranges to include everyone.

Back to basics

Make-up artist Liz Pugh works with a huge variety of clients, from actresses to models, and believes that each individual's approach to their make-up should take into account skin tone above everything else. "Black women have really beautiful skin, but its needs are different to caucasian skin. On white skin the idea of using a base is all about covering up imperfections, but with black skin overdoing the concealer or foundation can result in taking all the life out, instead of creating a flawless look."

The best look: Liz's favourite look is dewy – ideally no foundation – but the right kind of foundation is OK as long as it's used sparingly. "Choosing a base is fundamental to any look for anybody, so it's vital to get it right," she says. Foundation should be free from oil, and as close as possible to your skin tone. Dark skins have a tendency towards oiliness, so it's best to avoid greasy formulations.

Selecting the right colour: "When shopping for base, find the three tones closest to your skin tone. You'll need to apply a stripe of each one side by side on your cheek to find the best match – there's no point using your wrist or neck, as skin tone varies on different parts of the body. The colour that 'sinks in' to your skin – the one that blends in immediately – is the one for you."

If you're really having problems finding the right match, Liz advises taking advantage of free make-overs in department stores and pharmacies. "Don't be phased by taking up the offer of a make-over – you don't have to buy anything and you'll get an opportunity to try out a look. Just make sure you check that you like what you see in natural daylight, away from artificial light."

Try: Clinique Superbalanced Make-Up in six shades (£17). Also recommended are all products from Fashion Fair and Dark and Lovely, specially formulated for dark skins. Fashion Fair has a fragrance-free range, which includes liquid make-up waterbase/oil-free (30ml, £12.50), available in 12 shades.

The shine question

If you're really terrified of going au naturel – and can't leave home without your powder – then follow Liz's tips for fighting shine. "The central panel of the face, or T-zone, is most prone to oily skin. When applying moisturiser, skirt around the middle of the forehead, nose and chin, then use powder in this area only. Again, choose a talc-free formula to keep skin looking fresh." Just remember though, that while oilier than white skin, the moisture content means youthful looks for longer.

Try: Clinique Loose Powder in Transparency No 6 (£17) or





Techniques to avoid

"The absolute worst thing is dark lip liner filled in with pale lipstick," says Liz. While she admits that this is a personal *bête noire*, she has a good argument against it. "Women with dark skin tend to have the most beautiful luscious lips, and defining them with dark liner turns a sexy, pouty mouth into a harsh, unsexy one." Other than that, Liz is liberal about methods. "To be honest, I use my fingers to apply make-up these days, as application and blending are much easier that way, especially for eyes, cheeks and lips."

Fashion Fair oil control loose powder (£15).

You can also try a base with a powder formulation to get the benefit of both a base and something to combat shine.

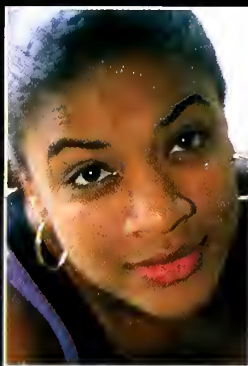
Try: Iman Second To None Cream-to-Powder Foundation available in 16 shades (£19.95), Clinique City Base Compact Foundation SPF (£16.50), Fashion Fair Perfect Finish Cream-to-Powder Foundation, available in 13 shades (£17.50).



Warm or cool

"The huge advantage of a darker skin is that it's a fantastic palette for strong colours," says Liz. In fact, she believes there are practically no colour rules, apart from the basic test to see if your skin tone is warm or cool. This 'diagnostic' method is great for choosing eye and cheek colours, but with lipstick the best method is always to try it on.

The easiest way to check your dominant skin tone is by using a bright red lipstick. Again, using the cosmetic display counter to your advantage, find a scarlet lipstick and apply it to your mouth. After five minutes, look at it in natural light. If you have a cool complexion, a true red will have a bluish tinge. If your complexion is warm, the red will have a honey undertone.



To choose great colours for you, simply pick a group of shades opposite your dominant skin tone – so if you have a cool complexion choose warm pinks, mauves

and chocolates, and if your skin is warm go for olive greens, sapphire or indigo. **Cool Complexions Try:** L'Oréal Crea Colour eye shadow mono in Moka (£3.99), Almay Amazing Lasting Blush in Henna (£8.95), Maybelline Natural Accents eyeshadow in Pink Opal (£3.29), Rimmel Special Eyes Mono eye Shadow in the Big Blue (£2.09).

Warm Complexions Try: Rimmel Special Eyes Mono eye Shadow in the Big Blue (£2.09), L'Oréal Perfection Perfection Crea Colour in Galactic Green (£3.99), Bourjois Pastel Joues blush in Terre Brulee (£4.50).



Liz's must haves

"This season the big look is still glossy lips, neutral eyes, or the opposite way around, with the focus on the eyes, with lots of black kohl," says Liz. "A look I like, particularly with dark skins, is black cherry lip gloss like Lancôme's limited edition gloss palette Les Incertains in Violette, which has black cherry, indigo and chocolate glosses (£18.50)."

Do's & don'ts

Colour in make-up is very much a matter of taste, but Liz feels there are certain no-no's for darker skins. "Don't go for white or light pearlised colours, as they can look ashy. That doesn't mean you can't have sparkle, though; it's just that glittery eye or cheek colours look better on dark skin if you choose richer shades which have a denser pigment. And if colours are richer but dark, you can get away with blending a variety of different shades."

From Obsession and Poison to Relaxing and Pleasures

Fragrances reflect the ever-changing world we live in.

Samina Khan, creative marketing manager at CPL Aromas, describes how the excesses of the eighties were replaced by the caring, sharing nineties

Fragrances – like films, music and fashion – represent an interpretation of the values, attitudes and influences of the society from which they come. It could be argued that they all represent our continuing search for our own identity. It is fascinating to journey back in time and witness how the values and attitudes from the past two decades are reflected by the fragrance successes of those times.

Through the smells we wear, we are able to chart the values and identity of our times.

Excess of the eighties

Much has been written about the eighties, the decade of excess and decadence that has the power to simultaneously embarrass and entice us. It was the decade of Maggie Thatcher, the Yuppie and the property boom; power and money were the twin gods at whose feet we worshipped. Britons all round the country were openly discussing their new found wealth and Gordon Gecko, in the film 'Wall Street', captured the mood with his now infamous statement "Greed is Good".

So what of the fragrances

of this era? Power was also the vital key, the power of a fragrance to blast into a room before you did and proclaim your entrance, declare to everyone present "I'm so important I will permeate the very air that you breathe."

The archetypal fragrance from this time has to be Poison, a fragrance that truly lived up to its name of being potent and dangerous. In fact, the strength of the fragrance so outraged certain individuals that it was banned from some restaurants in the States. Other fragrances that manage to capture this era include Giorgio – a perfume launched with the cachet of the upmarket, exclusive Beverly Hills label and with a fragrance that was equally powerful and characteristic; and Obsession, a fragrance that perfectly captured that ever-present theme to be found within fragrance marketing – sex.

While it may appear that with the perfect vision of hindsight we can laugh at the thought of women wearing these eighties follies, they were, and to a large extent still are, brilliant perfumery creations – they understood what was happening within the gloss of Dallas- and Dynasty-inspired society, distilled its essence and gave it back to us in perfumes that had women the world over clamouring for more.

The hangover cures

The beginning of the nineties can be considered "the decade after the one before". We woke up with a huge hangover consisting of negative equity, the growing menace of HIV, looming recession and general disquiet with the world. The parties and glamour of the eighties were replaced with a growing introspection:

"Just what is important in our world?"

As we were busy trying to answer this question, we were also busy purging our memory of the decade that had gone before. In perfume terms, this translated into a huge purification with a deluge of clean, pure watery fragrances. L'Eau d'Issey led the way and was quickly followed by a tidal wave – L'Eau d'Eden, L'Eau par Kenzo, Acqua di Gio, the list goes on. It was almost as if we were trying to wash away any trace of the heavy rich fragrances that still lingered on our skins from the eighties and do so with fragrances that were all fresh, light and clean. From



Catrin Klein, email: tan@ckone.com



Catrin Klein, email: danny@ckone.com

fragrance all capturing the prevailing nineties zeitgeist – simplicity and androgyny – a fragrance for the Generation X. cKone broke no huge creative fragrance barriers, it is after all a modernised cologne – what it did manage to do however, was to establish a new teenage market within the fragrance world who were all eager to fragrance themselves with the marketing genius of the great god Klein.

Mind and body matters

So what is the nineties about? I believe it is a decade of questioning. Questioning values that we have long since taken for granted and asking the question "Do I still believe this? Is this still relevant for me?" This questioning can be witnessed in many diverse areas of life from the political arena to the purely personal.

Politically we have recently been witness to some profound global changes – the dissolution of the Soviet Union, the abandoning of Apartheid,

the decadence of the eighties into the baptism of the nineties and our expected rebirth?

If Poison can be said to encapsulate the eighties then surely cKone is the fragrance that we will remember as being the fragrance of the nineties. A fragrance which is another one of those perfect fits with its name, marketing and



integration of Eastern holistic practices within the rigid Western medical framework. There is the acceptance that yes, the mind and body do affect each other and it is not possible to treat one without reference to the other. Practices such as acupuncture, shiatsu, yoga and reflexology are all becoming increasingly well known and accepted.

Within this framework it is hardly surprising to find that the area of mind/body connections has influenced the fragrance market. Many new fragrances are claiming mood enhancing properties: Lancôme's Aromatonic fragrance is said to benefit from extensive research into the effects that the fragrance ingredients have on mood. Relaxing by Shiseido is soon to have a more up beat partner in Energising to

the ongoing talks in Northern Ireland – huge changes in the attitudes of governments and the people who elect them.

Medically we are also witnessing the gradual



be launched later in the year. Both fragrances are again the result of studies into aromachology – the fragrance industries version of aromatherapy, also used by Coty for The Healing Garden range.

It is interesting to look at some of the names of recent fragrance launches – Happy, In Love Again, Pleasures, Envy – and see a clear theme: emotional states of mind. Wear the fragrance and you will feel (fill in the blank).

It is hardly surprising to find natural ingredients playing an important role within many new fragrance launches; Green tea can be found in Tommy Girl and Aromatonic while tomato leaves is displayed in In Love Again and Le Monde est Beau.

Simple and sensual

As the world around us is increasingly becoming more and more high tech, with information bombarding us from all sides – voicemails,

e-mails and the internet – so we look to simplicity in our lives and in our fragrances. We have recently seen the launch of some 'Zen fragrances' that extol the virtues and the beauty of a single flower – Hiris by Hermès is based around an Iris, while Lily by Dior is just as its name proclaims, a straight lily of the valley fragrance. These fragrances return to the essence of perfumery – simple beauty.

So what do we predict for the future? A continued return to natural ingredients which will see the welcome comeback of the warmth and sensuality that has been washed away in the past few years; warm woods, rich exotic spices, amber notes and mosses. But this time around, they will be created to entice rather than dominate. One thing is guaranteed – fragrance will continue to enchant us and reflect our moods as we step into the new millennium.

Many women's health problems are related to the monthly menstrual cycle. Our resident pharmacist **Jeremy Clitherow FRPharmS MBE updates your knowledge on management of period pain, PMS, cystitis and thrush**

Periodic and personal

Ask any chauvinist about women's health problems and he will come back with the sexist retort, 'it's all down to their plumbing'. Tactless it may well be, but there is more than a little truth in it when we look at the anatomy and physiology.

Designed for life

From a design point of view, the reproductive anatomy of a woman is purpose built for conception, safe gestation and giving birth when the time is right. However, there are snags. For best results, regular ovulation is essential, as is a well nourished and healthy womb, plus a short birth canal.

Regular ovulation brings with it the menstrual cycle, where the lining of the womb, the endometrium, is developed to accept and to capture the fertilised egg; the production of the mature egg; its release, and if not fertilised, the shearing off of that unneeded womb lining.

The monthly preparation of the womb lining is an intricate and complicated balance of hormones. At the end of the month there is an upheaval of hormonal activity which culminates in the uterus bleeding between its wall and inner lining. That is how the lining shears off. It is painful too.

If the physical distance from the uterus, and the bladder, to the outside is small, there is a much greater likelihood of germs successfully invading. The symptoms of infections in the bladder area will be an increased desire to go to the loo, possibly a burning sensation on passing urine going on to real pain and, worst of all, renal colic.

Painful periods

Dysmenorrhoea is the medical term for period pain. At the counter it is important to find out who and about how old the patient is. The likelihood of her abdominal discomfort being something other than uncomplicated period pain cannot be overlooked.



Joseph Lamb

Severe period pains are most common between the mid-teens and mid-20s. The symptoms will be moderate to severe spasms and cramps in the lower pelvis. Headache, nausea, sometimes vomiting, fatigue, water retention and backache are common co-symptoms. As often as not, the patient will recognise them because of their timing, just a day or so before her period is due. She will also know, from her past experience, that they will be over in 2-3 days. That condition is called primary dysmenorrhoea, and relates to the process of ovulation.

Secondary dysmenorrhoea presents as a duller aching pain, a week or so before the period is due and, unlike primary dysmenorrhoea, it is

not relieved by the bleed. In fact, it can be made worse.

OTC treatment

Self medication is quite appropriate for uncomplicated primary dysmenorrhoea. Paracetamol, ibuprofen and aspirin are suitable remedies.

● Paracetamol has no anti-inflammatory effect and so may be useful for the pain but not the swelling. It is safe in normal doses but, as with all medicines, deserves respect and safe storage.

● Ibuprofen has both anti-inflammatory and analgesic effects. Many sufferers find this the best of all for period pains. It cannot be taken by people with stomach ulcers because of the risk of a gastrointestinal bleed, those sensitive to aspirin or asthmatics. Some period

Aims

After reading this article on women's health you should:

- Know what symptoms are associated with dysmenorrhoea and how to treat them
- Be aware of symptoms of pre-menstrual syndrome and of self-help measures or OTC preparations that may bring relief
- Understand how cystitis develops and be able to advise on preventative measures
- Know which groups of customers are more likely to suffer thrush and why

pain sufferers favour the addition of a little codeine to the ibuprofen (Nurofen Plus), just to dull the breakthrough symptoms.

● Aspirin is another good anti-inflammatory analgesic if you can take it. It causes gastric discomfort in some and can interact with other drugs, most notably warfarin. Rest, hot drinks and the old stand-by the hot water bottle are effective too.

Secondary dysmenorrhoea is quite different, it should always be referred to the pharmacist who is most likely to ask about other symptoms such as a discharge, mid-cycle bleeding and other sensitive areas. He or she will probably refer the patient to the doctor.

Syndrome

Premenstrual tension (PMT) should really be renamed premenstrual syndrome. Apart from the patronising attitude which is so often associated with the term PMT, it is a misnomer. The condition is a jumble of mental, emotional, hormonal and physical symptoms linked with the menstrual cycle. It is not just tension. Ask anyone who suffers and be prepared to duck, if you ask at the wrong time!

The balance of domestic routine and work can be so dramatically disturbed that

Continued on P2

Can you recommend a stronger thrush cream that cools the itch immediately?



Clotrimazole BP

2% thrush cream
With New Canesten¹ you can.

Research shows that the main symptom women want immediate relief from is the itch.¹ New double strength 2% Canesten Thrush Cream is

specifically designed for women to cool itching straight away and is the ideal complement to Canesten Pessary or Canesten Once.

Product Information. Presentation: Canesten 2% Thrush Cream contains Clotrimazole BP 2%w/w. **Indications:** Treatment of candidal vulvitis. To be used as an adjunct to the treatment of candidal vaginitis. Can also be used for treatment of the sexual partner's penis to prevent re-infection if considered appropriate by the patient's doctor. **Dosage and administration:** Apply to the vulva and surrounding area two to three times daily and rub in gently. If after concomitant treatment of the vaginitis, the symptoms do not improve within 7 days, the patient should consult a physician. **Side-effects:** Rarely, local mild burning or irritation immediately after use. Hypersensitivity may occur. **Contraindications:** Hypersensitivity to clotrimazole. **Use in pregnancy:** Only when considered necessary by a physician. **RSP:** £4.49. **MA Number:** PL 0010/0077. **MA holder:** Bayer plc, Consumer Care Division, Newbury, Berkshire, RG14 1JA. **Legal Category:** P. **Date of preparation:** August 1999.

¹ Data on file, U&A Study, June 1997

the patient cannot cope. TLC at home, empathy at work and a sensitive caring ear are good allies.

The condition starts mid cycle, around day 14, with increasing severity until menstruation. It usually begins with a sensation of bloating in the pelvic region, sometimes swollen ankles and fingers, increased irritability, tender breasts, tiredness, and mood swings.

Correct diagnosis is with a calendar. The patient should keep a note of the date and symptoms. They will always be cyclical. The written evidence brings some relief at the end of the month. How often have we heard 'I thought I was going mad'?

Self help

Regular exercise has been found to reduce the severity of PMS and has the added advantages of improving general health and fitness.

Patients should also be advised not to skip meals, especially breakfast, as going too long without food can exacerbate symptoms.

Vitamin B6 has been reported to be of benefit although some of the doses used in studies are too high to be safely recommended. A daily dose of 50mg has provided some women with symptomatic relief.

Evening primrose oil, containing gamma-linolenic acid (GLA), seems to bring relief to some sufferers.

Cystitis

Cystitis is an inflammation of the urinary tract. Patients usually self diagnose. Their symptoms range from discomfort to severe pain when passing water. Half of all cases of cystitis are bacterial infections.

Men presenting with cystitis should be referred to the doctor to exclude more sinister conditions such as cancer, kidney stones or enlargement of the prostate gland.

Children with cystitis must be referred to the doctor as a matter of urgency as must the pregnant. In this case any infection in the urine could affect the baby or if left untreated ascend the ureters into the kidneys.

If you have a good relationship with your local surgery, ask for some sterile sample bottles. When you refer a patient with urine problems, advise them to take a fresh sample of urine with them.

Blood in the urine, could

arise because of a bladder or kidney stone, but the symptoms would be different from cystitis. The patient would have severe pain in the kidney area. Usually though, it is due to inflammation of the tissue of the bladder and urethra. It is not too serious providing it is treated quickly, usually with antibiotics.

OTC treatment

OTC treatment of cystitis should be limited to two days. If the condition persists, refer to the doctor.

The pain of cystitis can be relieved with our usual armory of analgesics.

The first line of attack OTC will be by making the urine less concentrated and more alkaline. This will reduce the burning and scalding symptoms when passing water. Plenty of fluids will reduce urine concentration. Potassium citrate, is the old favourite for changing the pH (acidity/alkalinity) of the contents of the bladder and is the active ingredient of Cystopurin. More modern formulations of citrates include Cymalon, Cystoleve, Canesten Oasis and Cystemme (all containing sodium citrate).

Cranberry juice is a traditional remedy for cystitis and Roche has recently reformulated Cystopurin to include natural cranberry extract. Cysti-Care, a new supplement from HealthAid also contains cranberry extract.

Cystitis sufferers should be aware of self-help measures (see box below).

Self-help for cystitis sufferers

- After a bowel movement always wipe from front to back to prevent transfer of germs from the faeces to the urethra
- Women prone to cystitis should avoid using vaginal deodorants, and perfumed bath or shower products

Let's talk about thrush

Thrush is another common condition with around one in every four women in the UK aged between 16 or 60 being affected every year.

The yeast-like fungus is caused by *Candida albicans*, a mould which thrives in warm, moist environments. The symptoms are itching and possibly a vaginal discharge. The discharge can vary from a slight watery one to a copious

frothy one. It is a feature of thrush that the discharge is creamy in colour and does not usually smell. Bacterial infection discharge is usually coloured and has an unpleasant odour. Neither type is pleasant for the patient, or her partner.

Thrush is contagious. Some men who are infected show no symptoms. Others develop severe itching and inflammation of the penis.

Thrush itches like mad and, not surprisingly, patients scratch themselves so secondary bacterial infections are common, but easily treated.

High risk

Some women are more likely to develop thrush, so keep that in mind when you ask your 2WHAM questions

● Any other medication?

Chest patients who regularly contract respiratory tract infections are at risk because of their repeated use of antibiotics and anti-inflammatory steroids. Both predispose the patients to candida infections.

Antibiotics distort normal flora and fauna of the gastrointestinal tract and *candida* capitalises on it. The mechanism with steroid users is not clearly understood. In the sexually active, reinfection is inevitable if both partners are not treated effectively and simultaneously.

There is also a link with the oral contraceptive pill.

● Pregnancy

Pregnancy and thrush infections go together, so it is wise for women to be alert before the event.

● Diabetes

Women diabetics tend to suffer from thrush more because of the increased level of sugar in their urine.

● Vaginal hygiene

Some 'personal' deodorants are highly perfumed and can irritate delicate tissue. Don't overlook the perfumed bath products either.

OTC treatment

OTC treatments for thrush are oral and topical. They use the antifungal effect of the chemical group called the imidazoles. You can identify them from the list of active ingredients in your products. They all end with 'zole' - clotrimazole, fluconazole and econazole. There is a very small incidence of sensitivity reactions with imidazoles.

The only oral imidazole treatment is a once-only capsule - Diflucan One

(fluconazole). It is rapid in onset and very effective.

An alternative treatment is Canesten Combi, a combination of a single clotrimazole pessary and clotrimazole cream. The pessary tackles the underlying infection and the cream relieves the symptoms. A discreet reminder that the partner needs simultaneous treatment is essential to all of sexually active ages.

Local anaesthetic creams for the irritation such as Vagisil Medicated Cream (contains lignocaine) or Lancane Cream (containing benzocaine) can bring other problems like sensitisation in their wake.

It is also worth mentioning that tights and close fitting underwear help create the warm, moist conditions that thrush thrives in. Socks, stockings and cotton underwear allow air to circulate.

A tip for holidaymakers unable to get to a pharmacy is that plain yoghurt works for thrush too.

Discreet enquiries

In an ideal world you would be able to ask questions about all of these conditions outright in absolute privacy, but most of us have to make do with a quiet corner. All staff need to project an aura of quiet sensitivity towards these conditions.

Although some customers will be quite blasé about their symptoms, others are acutely embarrassed and the thought of a man serving them literally drives them elsewhere. If one of your male colleagues is mid sale and is beginning to flounder, both he and his customer may welcome a female colleague discreetly 'helping' with the enquiry. This presumes that both members have the same knowledge base.

Period pain, PMS, cystitis and thrush may not be life-threatening conditions but they can certainly make life miserable for sufferers. An appropriate sale of an OTC treatment, backed up with some practical advice on prevention can.

Test your knowledge

Now that you've updated your knowledge on women's health, why not see how much you can remember? Turn to the question paper on page 46

Millennial medicines

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Dr Tieraona Low Dog looks at the rebirth of herbal medicine and some of the popular remedies in current use

Phytomedicine, or herbal medicine, is the science of using botanical remedies to treat illness or enhance well-being. It is an ancient science that laid the foundations for modern medicine.

More than 2,000 years ago, Hippocrates wrote extensively about herbal medicine and healing. Dioscorides, a Greek surgeon in Nero's army (54-68AD), described more than 600 plants in his extensive *De Materia Medica*. Galen (131-210AD) instituted an elaborate system of herbal polypharmacy, and the term 'galenicals' is still used today to describe herbal simples.

Up until the late 1800s, drug preparations were primarily made of flowers, leaves and roots. In 1850, 80 per cent of the medicines used in Europe and the US were derived from plants. But by the end of the 19th century, pharmaceutical companies began to gain a strong foothold in the field of medicine, and drugs made from single constituents were developed.

Chemists looked for chemical compounds that could be analysed precisely and dosed in exact milligrams, with effects that could be accurately measured physiologically. This was often a difficult task with plants containing hundreds of constituents. The use of herbal medicine declined sharply after World War II with the development of new, powerful drugs.

Herbal medicine has enjoyed a resurgence since the late 1960s, and scientific research has validated the traditional uses for a number of



Above: St John's wort, commonly used as an anti-depressant

prevent wound infection. Today's medical community appears most interested in the lipid-lowering properties of this herb. Garlic lowers total serum cholesterol, triglycerides, and low-density lipoproteins, while increasing high-density lipoprotein.

Garlic oil contains methylallyl-trisulphide, a substance which inhibits platelet aggregation. It also activates fibrinolysis, the body's mechanism for breaking down blood clots.

Given the safety of garlic and the beneficial effect upon the circulatory system, it seems reasonable for patients to add garlic to their daily diet. Adverse effects are uncommon.

● **Echinacea** (*Echinacea purpurea*, *E. angustifolia*, *E. pallida*)

Common uses: for the prevention and treatment of colds, upper respiratory infections, uncomplicated lower urinary tract infections, and for wound healing.

● **Ginger** (*Zingiber officinale* Roscoe)

Common uses: anti-emetic, digestive aid, and circulatory tonic.

Research confirms that ginger eases bloating and abdominal cramping, and increases the tone of the intestinal musculature. The German health authorities have approved ginger for the treatment of indigestion. Human trials have



Dr Tieraona Low Dog

plants. The British Herbal Pharmacopoeia has attempted to provide a rational resource based on historical use and scientific inquiry.

But with all the advances in medicine, why are consumers returning to these ancient treatments? Although there have been remarkable advances in the field of medicine, the dangers of medical technology and the indiscriminate use of modern drugs

are a valid concern. Allopathic medicine has failed to find a cure for many of our chronic illnesses.

The increasing desire of patients to avoid many modern drugs poses a challenge to both the physician and pharmacist. Neither is adequately trained to deal with the many issues surrounding the use of plant remedies – active constituents, dosages, interactions and possible side effects with other drugs, and the therapeutic value inherent with the plant.

It is difficult to accurately evaluate the research. There is a lack of consensus regarding dosage, safety, and length of treatment. Scientific studies vary in quality, with many flawed by small sample size, lack of objective outcome measurements and short duration. Safety claims based upon a long history of use do not always apply to the way herbal medicines are used today.

Yet the sheer volume of herbal products consumed obliges pharmacists to expand their knowledge in order to support the positive efforts of the patient to achieve 'wellness'.

Herbs in common use

● **Garlic** (*Allium sativum* L.)

Common uses: lipid lowering, anti-thrombotic, antimicrobial.

For centuries, garlic was used to

Continued on P24 →



Marshmallow may slow the absorption of other drugs

demonstrated the anti-emetic effects of the root.

● **Ginkgo (Ginkgo biloba L.)**

Common uses: cerebral and peripheral vascular insufficiency.

Ginkgo is used in traditional Chinese medicine for the treatment of asthma and to enhance clarity. The German authorities have concluded that ginkgo extract is a safe and effective treatment for peripheral and circulatory disturbances, including intermittent claudication and memory impairment, and it has recently been approved for dementia.

The mechanism of action is not completely understood but the physiologic effects appear to be due to arterial vasodilation, decreased capillary permeability, reduction of blood viscosity, erythrocyte aggregation and capillary fragility.

● **Peppermint (Mentha x piperita L.)**

Common uses: as an anti-spasmodic, carminative, anti-emetic, rubefacient and as a flavouring agent.

Those with gastro-oesophageal reflux should avoid the use of peppermint as it lowers cardiac sphincter tone. Rare laryngeal and bronchial spasms have been reported in infants.

The leaf has long been used to relieve coughs and colds, ease headache, reduce fever, and settle an upset stomach. Topically, peppermint oils help ease musculoskeletal pain, haemorrhoids, and reduce the pain and itch of insect bites.

Peppermint is rich in volatile oils, principally composed of menthol. Menthol acts as an anti-spasmodic to the smooth muscles of the gut and lowers cardiac sphincter tone, facilitating belching.

● **Marshmallow (Althaea officinalis L.)**

Common uses: relief of inflammatory conditions of the mouth, throat and gastrointestinal tract.

Marshmallow root and leaf is an extremely safe herb. However, it may slow the absorption of other drugs if taken at the same time. This is because the root contains up to 10 per cent mucilage. When mixed with water, it forms a soothing substance for irritated mucosal tissue.

● **Willow (Salix spp)**

Common uses: anti-inflammatory, analgesic, and anti-pyretic.

Questions of efficacy are often raised with willow, as the level of salicin content can vary greatly between different species, and is much lower than one would expect for therapeutic activity. Willow contains salicin which, upon hydrolysis, yields glucose and salicylic alcohol. This can then be converted in the body to salicylic acid.

● **Burdock root (Arctium lappa L. great burdock, or Arctium minus (Hill) Bernh. common burdock)**

Common uses: arthritis, hypoglycaemic agent.

Patients with diabetes should be aware of the potentiating effect of burdock extracts if they are taking insulin or oral anti-diabetic agents. It should be avoided in large doses during the first trimester of pregnancy.

Burdock root consists of the dried roots of the plant. The principle component is a carbohydrate, inulin, which can comprise up to 50 per cent of the total plant mass. Burdock has been used primarily as a diuretic, anti-rheumatic and 'blood purifier'. It is regarded as a useful remedy for treating arthritic pain and sciatica.

● **St John's wort (Hypericum perforatum L.)**

Common uses: anti-depressant.

This herb is mainly used to treat depression in humans. It is the most highly prescribed anti-depressant in Germany where physicians prescribe it four times as often as fluoxetine. It has been found to be as effective as pharmaceutical antidepressants with a lower side effect profile.

The mechanism of action is unclear. The herb has been found to inhibit serotonin re-uptake, but in much higher concentration than is used to treat depression. It increases nocturnal melatonin production, which may help with sleep.

● **Valerian (Valeriana officinalis L.)**

Common uses: sedative, anxiolytic, and anti-spasmodic.

Valerian has been used for centuries as a digestive aid and to help promote sleep. In-vitro studies of this malodorous root have found that it inhibits the uptake and release of gamma-aminobutyric acid (GABA), enhancing sedation. Valerian extract exhibits weak anticonvulsant and antidepressant activity and has a relaxant effect upon the smooth muscle of the gastrointestinal tract. It is still unclear which constituents are primarily responsible for its activity.

● **Wild lettuce (Lactuca virosa L.)**

Common uses: sedative, anti-tussive.

Wild lettuce has been a popular remedy for restlessness, insomnia and rheumatic pain over the centuries. It contains two sesquiterpene lactones – lactucopierin and lactucin – which have been shown to exert sedative and painkilling properties in animal studies.

However, these chemicals are very unstable and present only in small amounts in the dried latex.

● **Gentian (Gentiana lutea L.)**

Common uses: Digestive aid.

Europeans have used gentian-containing aperitifs for hundreds of years to stimulate the appetite and aid digestion. The root contains several bitter compounds including gentiopierin, gentiin, gentiamarin, gentisin, and gentisic acid.

● **Passionflower (Passiflora incarnata L.)**

Common uses: Sedative.

Many herbalists recommend it to soothe the nerves, reduce anxiety, and to ensure a good night's sleep.



The passionflower has traditionally been used as a relaxant

Changes coming to the regulatory framework?

Paul Brittain, herbal policy co-ordinator at the Medicines Control Agency, explains how the licensing system applies to herbal remedies

Medicines sold or supplied in the UK are controlled under the Medicines for Human Use (Market Authorisations etc) Regulations 1994 and the Medicines Act 1968.

Article 1.2 of Pharmaceutical Directive 65/65/EEC, meanwhile, defines a medicinal product as: "Any substance or combination of substances presented for treating or preventing disease in human beings or animals".

Any substance, or combination of substances which is given to humans or animals with "a view to making a medical diagnosis or to restoring, correcting or modifying physiological function" is likewise considered a medicinal product.

The law provides that, in general, medicinal products cannot be put on the market unless they have a product licence (also called a marketing authorisation). This can be granted either by the Medicines Control Agency, or through the licensing authority of the European Commission, the European Medicines Evaluation Agency.

However, the regulations allow some medicinal products to be supplied without the need for them to go through the normal licensing procedures. This includes herbal remedies which meet conditions specified in Section 12 of the Medicines Act.

The Medicines Act³ defines a herbal remedy as: "a medicinal product consisting of a substance produced by subjecting a plant or

plants to drying, crushing or any other process, or of a mixture whose sole ingredients are two or more substances so produced, or of a mixture whose sole ingredients are one or more substances so produced and water or some other inert substance".

Section 12(1) of the Act allows a person to make, sell and supply a herbal remedy provided the remedy is manufactured or assembled on the premises, and that it is supplied after a consultation between the supplier and their patient.

Section 12(2) applies mainly to manufacturers, allowing them to supply herbal remedies without a licence where:

- the process to which the plant or plants are subjected consists only of drying, crushing or comminuting
- the remedy is sold without any written recommendation as to its use
- the remedy is sold under a description which only specifies the plant(s) and the process, and does not apply any other name to the remedy.

Although there are several hundred licensed herbal medicines in the UK, most herbal remedies are marketed as products exempt from licensing under Section 12.

Under Section 12, which is essentially an 'opt out' clause, there are no specific requirements for safety and quality, and regulation is arguably too loose. This has led to a number of public health issues. There are considerable concerns

about contamination, adulteration and poor labelling, particularly with traditional Chinese medicine (TCM) and Ayurvedic products.

The Government recently introduced an Order prohibiting the sale, supply or import of unlicensed medicines containing the plant *Aristolochia* following renal failure in two patients who had been prescribed traditional Chinese medicines containing this ingredient.

There is also concern about the levels of heavy metals found in some Ayurvedic traditional medicines.

Licensed herbals

Conversely, when seeking to licence herbal products, many companies have difficulty meeting the conventional requirements of safety and efficacy.

In seeking marketing authorisations for herbal medicines manufacturers must always provide full pharmaceutical dossiers on their specific products in accordance with current guidelines. For safety and efficacy data they will generally rely on bibliographical evidence, but will have to satisfy all the requirements of the relevant European directives. Regulation is arguably too tight.

Furthermore, there is little incentive for companies to licence herbal remedies when they cannot patent the material from which the products are produced. Plants are beyond the reach of even the Patent Office in this respect.

Herbal medicines have grown to be a multi-million pound industry, and it needs to be adequately regulated. This is an area which is under review at the moment.

Lady Hayman, the health minister at the time, met with various interested parties on March 22, and there was a considerable degree of consensus on the need to look for a new regulatory approach, possibly with some form of modified licensing.

Following this meeting, and at the minister's request, the MCA has held several informal workshops with over 40 herbal interest groups to generate ideas and assess the scope for a UK consensus on the way forward.

From the MCA's viewpoint, these meetings have been very positive, with a wide acceptance of the need or change.

The main areas to be addressed are:

- safety and quality requirements
- a more systematic means of providing information for consumers
- a 'lighter touch' on efficacy requirements.

Overall, the MCA is looking to achieve a workable balance between consumer safety and choice. However, at this stage it is too early to say what the MCA's preferred approach is.

European backdrop

In 1998 the AESGP, the European DTC Manufacturers Association, provided a review of the market for



Willow can help relieve musculoskeletal pain

the European Commission. It showed that member states operate a wide variety of practices to allow herbal products to be marketed.

The Commission recognises that the regulation of herbal medicines presents problems throughout Europe, and it is seeking to bring a semblance of order to a somewhat confused situation.

Recent developments include moves to clarify the information manufacturers need to provide when applying for a licence to demonstrate that a product has "well established use" for the purpose of meeting safety and efficacy requirements.

A further potentially significant development has been the discussion by the European Pharmaceutical Committee of a European Commission paper proposing options for creating a 'traditional use' category of medicines.

The paper was well received and a group comprising representatives of several member states will be taking the ideas forward and working up a paper for the Pharmaceutical Committee. The Government views this as a positive development and wishes to contribute constructively to the ongoing debate.

In addition to these initiatives, the Herbs Working Group has been made permanent. The Group is working on updating guidelines to make mutual recognition of licensed herbal medicines easier, and is also starting to develop agreed core 'data sheets' – or summaries of product characteristics (SPCs), as they are now known. SPCs will be aids to harmonisation, facilitating mutual recognition of herbal medicines by the member states.

References

- 1 *Medicines for Human Use (Market Authorisations etc) Regulations 1994 (SI 1994/3144)*
- 2 *Regulation 1(3) of SI 1994/3144*
- 3 *The Medicines Act Section 132*
- 4 *Ratification of an amendment to the Annex to Directive 75/318*

More than just folklore ...

Simon Mills, the director of the Centre for Complementary Health Studies, University of Exeter, outlines some conditions for which herbal medicines can be used, and highlights potential problems

Herbal medicines have been on the market for ages. The effect of the Medicines Act in 1968 was to give 'licences of right' to the many thousands of such herbal products on the shelves at the time. Around 500 of these historical 'licences of right' make up the basis of licensed herbal medicines today.

The future of the market in the UK hinges on talks currently underway in Europe on the licensing requirements for medicinal products of herbal origin. It may be that traditional claims for efficacy will be allowed to substitute for new clinical trials. This would allow new herbal licences for the first time in three decades, open up labelling and advertising, and stimulate growth market.

A clinical trial deficit

The problem faced by legislators is that it has been a slow process to establish clear evidence of efficacy using the pharmaceutical model.

A question that also arises is whether it is proper for pharmacists to become involved in the supply of herbal products. Surely these are untried, unproven remedies, with a complex and variable constitution?

In fact, there is much to commend in modern herbal medicine. In Europe these products are produced mainly as 'semi-ethical' medicines, and manufacturers have to comply with the normal post-marketing surveillance regulations to monitor

the safety of their products.

It is on issues of efficacy that problems are seen. It is rare to find conclusive clinical proof of the efficacy of a herbal remedy. There is little incentive for manufacturers to engage in clinical trials. Most produce generic medicines freely available from nature, with no commercial protection for any expenditure on research. This has led to unease in the medical sector about the renewed popular interest in herbs.

One of the significant features of the traditional database is that it is not just a hotchpotch of folk fancies. From the earliest days humans classified plant material into consistent categories based on properties of taste, appearance, or the immediate impact they made on consumption.

There are many cases where scientific insights can validate traditional practices. The early use of salicylate-rich willow bark as antipyretic and anti-inflammatory, the widespread use of liquorice sticks as dentifrices, and the 3,000-year-old use of psoralen-rich plants in the treatment of vitiligo in India have all been validated by modern research.

Use with POMs

The information available about interactions between herbal and conventional drugs is thinner than that on efficacy. Most advice must be based on theory. Fortunately

Continued on P26 →



Echinacea, for treating upper respiratory tract infections

the bias of theoretical advice errs on the side of caution, for the following reasons:

- the concentration of actives in herbs is usually low compared with their synthetic counterparts

- interactions with herbal remedies often involve neutralising and buffering of actives by modifying constituents such as mucilages, tannins and resins (for this reason such constituents are the first to be 'stripped out' in pharmaceutical investigations of plants).

The potential interactions between herbal and conventional medicines should be placed in the context of the normal diet. Any substantial intake of tea, coffee, alcohol or tobacco will have more effect on drug activity than most herbal medicines, and the 'bulk' of the diet will certainly have more effects on pharmacokinetics.

Interactions between herbs and synthetic drugs can be classified as either pharmacodynamic or pharmacokinetic.

Pharmacodynamic

Interactions of pharmacological activity are, at least, predictable in theory. There are some prominent generic cautions worth highlighting:

- **anticoagulant drugs** should not be combined with ginkgo, garlic and ginger

- **insulin-replacement therapy, anti-epileptic drugs and digoxin** all rely on critical dosage levels and all could theoretically be effected by plant constituents, so caution is essential

- **phenolic constituents** such as flavonoids, tannins, anthraquinones and coumarins may share some of the cautions attending salicylates

- **anthraquinone laxatives** and liquorice can deplete potassium levels and should be used with caution with digitalis therapy, especially when also combined with diuretics.

Pharmacokinetic

Ingestion of a herb can modify the absorption, distribution, metabolism or excretion of a drug. Interactions are less predictable here. However, the following possibilities arise:

- **plant bulking materials** (eg cellulose, pectins), mucilaginous constituents, tannins, saponins and resins are likely to interact with absorption of many substances, most often, but not always, reducing their availability
- **hot spices** like ginger and pepper are likely to increase absorption rates of many pharmacological agents and may also accelerate their metabolism
- **stimulating laxative and cholagogue remedies** may reduce the half-life of drugs like digoxin and morphine, where blood levels are maintained by the



Ginkgo: used to treat asthma in traditional Chinese medicine

enterohepatic circulation.

It must be emphasised, though, that the interactions which are listed are rarely established as such. The great majority of cases are only theoretical.

In these cases ...

Where there are concerns about the use of modern medicines for minor or self-limiting conditions, it may be that the consumer's instinct towards self-medication with licensed herbal drugs can safely be encouraged.

ACUTE indications – in early days before consulting the doctor

- **Minor respiratory infections.**

Concern about over-prescription with antibiotics in minor self-limiting conditions provides increased opportunities for remedies with evidence for supporting immune defences against colds, sore throats and minor cough conditions. Echinacea and some garlic products have established roles here.

- **Digestive upsets.** Herbs have always had a role in treating problems in the gut. Bitters, such as gentian, chicory, hops and coffee, have a reputation as digestive stimulants. The hot spices like chillies, mustard and especially ginger have been confirmed to increase gastric defences against enteric infection in hot climates.

Mucilaginous herbs like marshmallow can relieve many minor inflammatory and hyperacidity conditions of the upper tract. Herb tisanes of teas like peppermint, camomile or lemon balm will relieve a range of other symptoms.

- **Stress reactions.** Many herbs have reputations as relaxants, traditionally used in convalescence, but with real potential for modern stress conditions. Valerian, passiflora and wild lettuce have been the traditional treatments here. Pacific root kava is attracting a lot of attention as an effective anxiolytic. Traditionally, St John's wort was used as a tonic in tense and nervous conditions. In minor troubles, camomile is again to be recommended.

CHRONIC indications – after clearing with doctor (self-treatment alone or in

combination with a prescription medicine)

- **Mild depressive conditions.** St John's wort has established efficacy in this indication.

- **Stress and sleeplessness.** The remedies mentioned for stress reactions are generally acceptable for medium-term consumption and there are few signs of addiction.

- **Tired-all-the-time.** Few tonic herbs survive on the OTC lists. However, St John's wort was originally a tonic herb. Saw palmetto was used as a general tonic for men long before its modern prostatic reputation.

- **Chronic inflammatory disease.** This is probably best treated after an extensive consultation, as such conditions are rarely straightforward. However, some relief may be had with cod liver oil, other fish oils, evening primrose oil and devil's claw. Willow bark has a well-established use as a treatment for rheumatic pain. Burdock was

traditionally used for clearing 'toxic' conditions associated with joint and skin inflammations.

- **Disturbed menstrual cycles.** Only three traditional women's remedies are generally available OTC in this country. *Vitex agnus-castus* is a Mediterranean remedy and is claimed to be effective for a wide range of menstrual and pre-menstrual problems. Helonias root is a traditional American remedy to enhance menstrual cycles. Black cohosh is another traditional North American women's remedy for conditions in which low oestrogen supplementation might otherwise be indicated. Evening primrose oil is another popular supplement in PMS.

- **Bowel problems (constipation and irritable bowel).** The anthraquinone laxatives are still primarily based on herbs such as senna, cascara, frangula, rhubarb root and aloes. They are, however, constrained by law for long-term treatment and are in any case not appropriate for such use.

Rather, bulking laxatives like the seeds or husks of psyllium or ispaghula, and flaxseed (linseed) are to be recommended. Bulking laxatives are also indicated as a basis for irritable bowel, along with peppermint oil and spices such as ginger, fennel, cardamom, aniseed.

- **Chronic and recurrent low-grade infections/lowered immunity.** Echinacea and garlic are almost tailor-made for rebuilding the body's defences over several months of treatment.

A taste of the market

Kate Addison, category manager for Höfels, looks at how to make the most of the herbal opportunity

It is concerns over long-term drug usage and the desire for a natural alternative that has given rise to today's self-medicating consumers. They are driving growth in the UK herbal market at a staggering 80 per cent a year and now buy £40 million of products annually. This is equivalent to sales in the hayfever remedies category.

The growth in herbals is not just a UK success story: incredibly eight out of ten of the world's population now use herbal medicines. In the US, for instance, where the market is more developed, consumers spent approximately \$2.8 billion on herbal remedies last year.

In the UK the most popular herbal product after evening primrose oil and garlic is St John's wort, generating £11m of sales. Ginseng has also shown considerable growth with annual

sales at £6m and increasing by 17 per cent a year.

Incorporating herbal products into the supplements fixture with such a diverse mixture of packs and therapeutic categories presents various different merchandising options. For ease of self-selection, Höfels recommend block branding, positioning beacon brands at eye level where visibility is highest.

By placing familiar ingredients such as garlic within a brand alongside new variants, consumers are reassured by the brand name and able to self-select from the range available.

But innovation, umbrella branding, merchandising and consumer education are not the only market drivers. Recommendation has driven consumer awareness and had made herbal medicines more accessible.

In the modern world it is impossible to avoid stress but Sarah Purcell shows how it can be reduced and managed

Aims

After reading this article you should:

- Be aware of the effects of stress on the body
- Know what symptoms stress sufferers are likely to present with in your pharmacy
- Be able to advise on self-help measures to reduce or manage stress

"Feeling out of control is one of the hardest emotions of all to cope with," says chartered psychologist Trevor Jellis, director of the Stein Clinic in London. We all react differently to stress and some of us can cope well with a lot of it, while others were designed for a quiet life. "And while the occasional stressful episode won't affect us much, if stressful situations are repeated day after day, they can make us ill," say Drs Phil Evans and John Lockley in their book *Conquering Stress*. "Stress occurs when we don't react appropriately to the things which happen to us – we've stopped coping."

A certain amount of stress is actually good for you and is the body's natural reaction to threat. Called the 'fight or flight' mechanism, when facing a threat, your body releases stress chemicals, such as adrenaline, to make the heart beat faster, the blood pressure rise, muscles tense up and the brain to reach maximum alertness, to enable us to run or fight. However, in the modern world we rarely have to make a physical response, so the stress chemicals remain in our body for much longer – and if we're challenged with another stressful situation soon afterwards, yet more adrenaline is produced, which has a cumulative effect.

How you cope with stress is more important than the amount you are subjected to. Some of us cope well with huge amounts, even thrive on it, while for others a confrontation with a shop assistant is enough to send them over the edge. While life without stress would be very dull, going beyond the level we can comfortably deal with on a long-term basis leads to mental and physical problems.

Symptoms of stress

"The person who's under stress looks just like an animal ready to run away – the muscles are tense, the

Continued on P28 →



Janine Lamb

Stressed out

No longer confined to high-powered executives, stress is now an everyday problem affecting people from all walks of life. Every day 270,000 people take time off work for stress-related health problems, adding up to a massive 40 million lost working days each year, which costs the nation £7 billion.

Research by the Health & Safety Network found that

60 per cent of work absenteeism is down to stress – one in five employees admitted taking time off for this reason.

Stress has certainly taken its toll on our health, and is now believed to have overtaken the common cold as the number one reason for taking sick leave. And it's a worldwide problem – a European survey found that 28 per cent of EC employees

said their health had suffered as a result of stress, while one in 13 people have consulted their GP for it.

But it's not just work related. We're all having to cope with more pressure than we can handle – at home, at school, on the roads and even our leisure activities. Yet few of us know how to deal with this pressure before it becomes a hazard to our health.

heart rate and blood pressure raised and the nervous system secreting adrenaline," say the authors of *Conquering Stress*. The many signs of stress include:

- feeling anxious, keyed up or over-excited
- having difficulty concentrating, being forgetful
- feeling irritable and depressed
- making mistakes and having minor accidents
- drinking or smoking more
- sleeping problems – either too much or not enough
- pounding heart and breathing rapidly
- sweating and flushing easily
- diarrhoea or constipation
- headache and tense muscles
- back pain.

Stress affects your physical and mental health. It contributes to hypertension, which can lead to heart disease and stroke. Gastric ulcers are directly related to stress, while many migraine sufferers can link an attack with a stressful episode.

Tension headaches are one of the most common health problems linked with stress and are caused by the tension in the neck, back and shoulder muscles.

Studies have shown that people prone to stress have a weakened immune system, which makes them more susceptible to illness, particularly viruses like colds and flu.

Stress is a common underlying cause of insomnia too, and lack of sleep makes all our problems seem worse as well as compromising our immunity to infection.

If you're under stress long-term, then mental problems like depression and panic attacks are more likely.

What stresses us out?

Researchers Holmes & Rahe analysed the stress caused by different events. The top 10 stress triggers are:

1. Death of a spouse
2. Divorce
3. Marital separation
4. Prison sentence
5. Death in family
6. Personal injury or illness
7. Getting married
8. Losing your job
9. Marital reconciliation
10. Illness in the family

Stress at work

There is no doubt that work is one of the most significant causes of stress, and this can have knock-on effects on

health, relationships and morale. "Lots of companies have downsized recently and it's not uncommon to find one person doing a job that was designed for two people these days," says Trevor Jellis. Long journeys to work are another major factor, and not always simple to resolve.

At the Institute of Personnel & Development, they ask employers to look at five areas when deal with stress complaints:

1. Management style
2. Workload
3. Bullying and harassment by colleagues
4. Working environment (including travel)
5. Quality of training and supervision.

Coping tips for work

- If your boss or a colleague is the cause of your stress, then confront them about it. If you're not able to, or don't want to, you'll have to find ways to live with the situation, says Trevor Jellis.
- Take all the holiday you are due.
- Try not to mix home and work life. Take work home only if absolutely necessary.

Family stress

Anyone who's looked after small children will tell you how stressful this can be. "The long drawn-out working day, which isn't as intensive as in industry, but is just as stressful because there isn't an obvious time to relax and be off-duty," say Drs Phil Evans and John Lockley. "Not only does the working day extend from when you get up until when you go to bed, there's no let-up at the weekend either."

But it's not just small children who are stressful. "We get a lot of people who are very stressed because of elderly parents," says Trevor Jellis. They feel incredibly guilty about not spending enough time with them. And if you're looking after an elderly or infirm relative at home, this can be even more stressful.

Coping at home

- Give yourself planned time for rest and relaxation.
- Arrange a babysitter so you can do things you enjoy.
- If you're looking after a relative, see if you can organise respite care.

Coping with stress

When Trevor Jellis advises people on dealing with stress, he first gets them to fill in a questionnaire. "We look at the sources of stress, the effects they have and

attitude to them. For each one, we suggest changes the person could make to reduce their stress levels. The one you can do most about is your attitude to stress – finding a way to live with the things you can't change."

Time management is an essential skill for coping with stress, and knowing the difference between the urgent and the important will help enormously. Tackling the important tasks first will go a long way towards reducing stress.

Therapy and medicine

While the essential thing is to tackle the cause of your stress, alternative therapies and short-term medication will give relief, which will help you cope better.

- Aromatherapy – a massage by a trained aromatherapist, using selected oils, can be a wonderful experience. At home, a simple way to unwind is a warm bath with a few drops of a relaxing oil, such as lavender, ylang ylang and mandarin. A ready blended alternative is the Relax variant of Nelson's Foaming Bath Treatment (200ml, £6.95), which combines sandalwood, geranium and orange essential oils to balance the body and spirit.
- Massage is an excellent way to relax tense muscles, and is particularly good for posture-related tension headaches. It works by increasing the circulation of blood to the muscles and encouraging lymph drainage, which will help to ease the pain.
- Yoga is excellent for all stress-related problems. The deep relaxation techniques which yoga teaches help to lower the blood pressure and release muscle tension in the body.

OTC remedies

OTC preparations should be for short-term use only as they don't tackle the cause of stress. However, by providing temporary relief from symptoms such as sleeplessness, subsequent tiredness and irritability, such products can help break the stress cycle. Natural herbs such as hops, valerian, passiflora and wild lettuce are included for their sedative actions which aid relaxation. Products include: Kalms (100, £3.75; 200, £6.50) – contain hops, gentian and valerian extracts; Quiet Life (50, £2.25; 100, £3.50; 200, £6.15) – ingredients include hops, valerian, passiflora and B2;

Natracalm (48, £3.29; 96, £5.19) contain passiflora; Phytocalm (50, £4.40) – contain passiflora, and Lanes Modern Herbals Stress tablets (60, £3.49).

Exercise to relax

Exercise stimulates the production of endorphins in the brain and helps get rid of excess adrenaline in the body. Regular exercise will help the body cope with everyday stresses and make it easier to relax, too. Any type of exercise will help, but pick something you enjoy so it doesn't end up being yet another chore.

A simple deep breathing exercise will help get rid of tension in your body. Try this method, suggested by sleep expert Dr Chris Idzikowski in *The Insomnia Book*.

- Lie flat on your back, placing one hand on your chest and the other on your abdomen.
- Inhale slowly through your nose, feeling the hand on your chest rise.
- Hold for a second, then reverse. Exhale and allow your muscles to relax.
- Do this exercise for about 10 minutes.

GR Lane has produced three consumer leaflets to coincide with Stress Awareness Day, on November 3. They are: *Family Stress*, *Financial Stress* and *Stress at Work*. Contact Lane's Information Service for copies. Tel: 01452 524012.

And remember, a few minutes spent talking or listening to a stressed customer can make a big difference to them.

Action points

Now that you've updated your knowledge on stress and its management, why not put your learning into practice?

- Think about a stressful situation at work. How did you deal with it? How would you deal with it now?
- If a customer asks for an OTC treatment for insomnia, ask a few questions to establish if this could be caused by stress. Suggest some self-help measures

Test your knowledge

Now that you've updated your knowledge on stress, why not see how much you can remember? Turn to the question paper on page 46

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Night Nurse and Day Nurse are the cold and flu brands that will help maximise your profits over the coming months.

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THE NO.1 PHARMACY ONLY COLD AND FLU BRAND.

Cold or flu - it's up to you

How do you distinguish between a cold and flu – and what should you recommend?
Adrienne de Mont MRPharmS offers some timely advice



Aims

After reading this article on colds and flu you should:

- Be aware of the differences between colds and flu, in particular the symptoms associated with each
- Be able to recommend appropriate treatment of cold and flu symptom
- Know which patients should be referred to the pharmacist
- Understand why antibiotics are not appropriate treatment for colds and flu, and be able to explain this to customers
- Be aware of the current campaigns by the Government to encourage patients to self-medicate this winter
- Know which groups of patients should be vaccinated against the flu

reason why people feel so bad with flu is that the body's defence system tries to overcome the virus and releases chemicals to fight it. It is this reaction that causes problems elsewhere in the body, such as headache, weakness, aching muscles and fever.

It takes about one to three days from the time of infection for symptoms to appear. How long a person remains contagious varies greatly but an infected person can probably pass on the disease the day before symptoms appear and up to a week afterwards.

Many people die from flu each year, mainly as a result of complications involving the lungs, heart and nervous system. Pneumonia is a common complication and can be caused directly by the flu virus or by an additional bacterial infection. See the advice below as to when patients should be referred to the pharmacist.

Treatment

Treatment is similar for both colds and flu. Resting, keeping warm and taking plenty of non-alcoholic drinks can help. Aspirin, ibuprofen and paracetamol are useful for relieving aches, pains and fever. A blocked or runny nose can be eased by decongestants, while coughs can be treated

If you've got flu, staying in bed and taking OTC remedies is the best action

If you have flu, the chances are you think you are dying. But most people recover in a few days and do not need to see a doctor. Staying in bed and taking an OTC remedy to relieve the symptoms is usually the best action.

Because some cold and flu

symptoms are similar – such as a runny or blocked nose, sore throat and cough – people often think they have flu when they just have a bad cold. It's probably not flu if they can carry on with everyday activities. People with flu usually feel so ill

they cannot get out of bed.

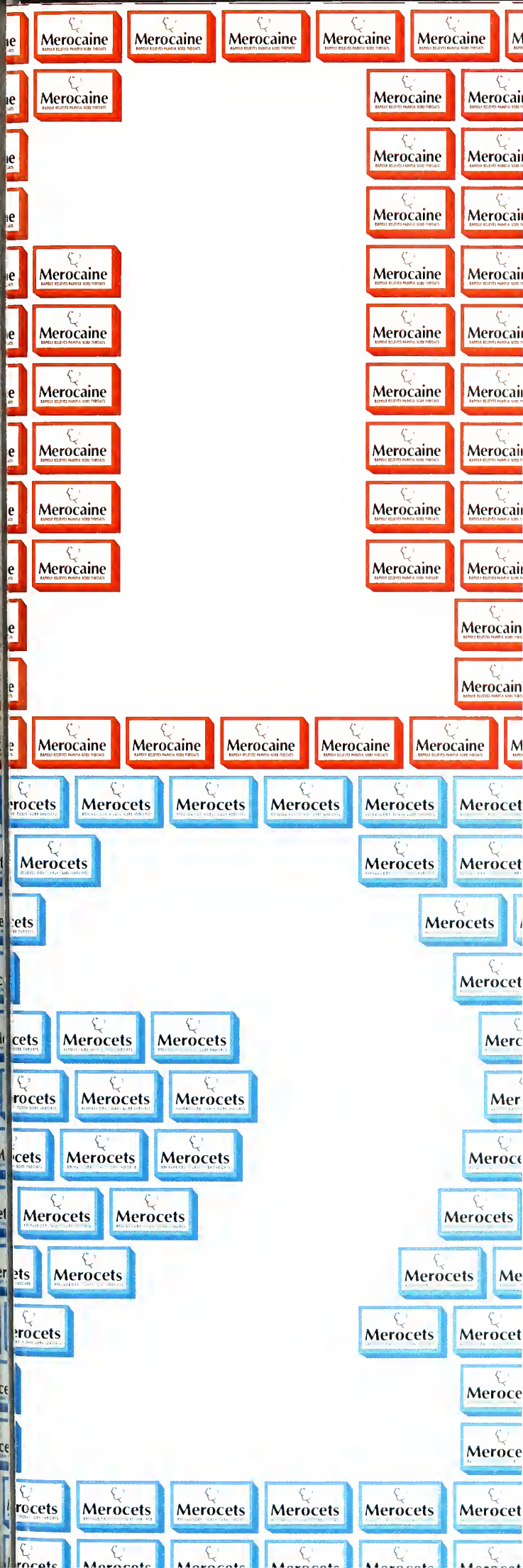
The checklist below, highlighting the differences between the two, will help you to decide whether your customer has flu or a bad cold. For some people, such as the elderly or those with long-term illness, flu can be serious so you should refer them to the pharmacist.

Flu and colds are caused by different viruses, but both are spread in droplets passed from infected people during coughing, breathing or sneezing. The flu virus passes down the airways to the lungs where it multiplies quickly. As it does so, it can cause a runny nose, sore throat and cough. The

Checklist: Is it a cold or flu?

Symptoms	Cold	Flu
Aching muscles	No	Yes
Severe headache	No	Yes
Loss of appetite	No	Yes
Raised temperature in first 24 hours	No	Yes
Feeling so weak and unwell it is difficult to get out of bed	No	Yes
The symptoms started suddenly	No	Yes

Continued on P32 →



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Merocaine and Merocets Product Information: Active Ingredients Merocets Lozenges Cetylpyridinium Chloride 1.4mg Merocaine Lozenges Cetylpyridinium Chloride 1.4mg, Benzocaine 10mg **Uses:** Merocets Symptomatic relief of sore throat Merocaine Relief of pain and discomfort of throat infections. **Dose:** Merocets Adults and children over 6 years One lozenge every 3 hours Merocaine Adults and children over 12 years One lozenge every 2 hours as needed but no more than 8 in 24 hours **Contraindications:** Hypersensitivity to ingredients **Use in Pregnancy:** No data but cetylpyridinium chloride and benzocaine have been widely used for many years without apparent ill-effects **Side-Effects:** Urticaria and other allergic reactions very rarely, transient burning sensation of mouth rarely, Methaemoglobinemia has been reported with benzocaine **Precautions:** Merocets Label states 'If symptoms persist or are severe or are accompanied by fever, headache, nausea and vomiting, consult your doctor' Merocaine Label states 'If symptoms persist or are severe or are accompanied by fever, headache, nausea and vomiting, consult your doctor' **Licence Holder:** Merocets and Merocaine: Seton Products Limited, Tubiton House, Oldham, OL1 3HS **Product Licence Number/Legal Status/Price:** Merocets PL 11314/0107, GSL, RSP £1.99 Merocaine PL 11314/0105, P, RSP £2.45 **Date of Preparation:** September 1999

*Taylor Nelson Sofres Counterpoint MAT March 1999

according to whether they are dry or chesty. As usual you should check that the customer is not taking other medicines which may interact with an OTC remedy.

A recent survey by SmithKline Beecham found that 54 per cent of people feel under pressure to go to work when suffering from a cold or flu, yet taking time off and resting encourages a speedier recovery and prevents the virus from spreading.

Antibiotics won't make any difference because they act against bacteria, and colds and flu are caused by viruses. Bacterial infections, such as pneumonia, can sometimes develop after serious viral infections.

The Government is running a campaign to discourage the public from expecting doctors to prescribe antibiotics for colds, most coughs and sore throats. Over-use is leading to resistance, in which bacteria adapt and find ways of surviving. Antibiotics may be lifesaving for infections such as meningitis, but many infections get better just as quickly without them. By not using these drugs unnecessarily, they are more likely to work when we need them.

Department of Health campaign adverts will appear in newspapers and magazines, and posters in pharmacies and surgeries will tell the public that antibiotics do not work on coughs, most colds and sore throats. GPs have also been given 'non-prescriptions' to give patients explaining why an antibiotic has not been prescribed and what treatments should be considered instead.

The Government is also running a campaign to encourage the public to make wise use of the NHS this winter and treat themselves for colds and flu. There are fears that the long Christmas and New Year holiday, staff shortages and the millennium celebrations will put pressure on hospitals which were under severe strain last year.

Advertising with the theme 'Choose the right remedy' advises people to make full use of their pharmacy and to think hard before calling the doctor out of hours or going to hospital accident and emergency departments. So, not surprisingly, you can expect



Nurofen

Flu is usually associated with severe headache

even more customers in your pharmacy looking for cold and flu preparations.

The latest Consumer Health Information Centre's (CHIC) campaign is encouraging people to make sure they have medicines at home to cope with minor ailments over the holiday. The campaign reinforces the message that antibiotics do not help colds and flu, and the Ebenezer Sneezer leaflet is again available through pharmacies.

Vaccination

Prevention by vaccination is still thought to be the best way to tackle flu. The flu vaccine is recommended for all over 75s and people in long-stay homes, as well as patients of any age with heart, lung or kidney disease, diabetes and those who have a lowered immunity.

The flu virus is constantly changing, so new vaccines are produced each year to take account of these changes. Experts predict in

advance what strains of virus are expected to be in circulation and the efficacy of the vaccines depends on whether they are well-matched with the virus causing flu that season. If they are well-matched, the vaccines can be up to 90 per cent effective in young, healthy people but they are less effective in older people, whose immune systems do not work as well. Even so, they can still reduce complications and death by about 70 per cent.

Relenza

The new anti-flu drug Relenza has not been officially recommended for use on the NHS, although doctors may still write prescriptions for it if they think the patient with flu could be at serious risk from complications. It must be taken within 48 hours of flu symptoms starting. It comes as a powder for inhalation and the patients needs to take two inhalations daily

Refer to pharmacist

- If the symptoms are severe
- If the person has been ill for a week or more
- If there is chest pain
- If there is shortness of breath
- If coughing produces blood or yellow-green sputum
- The elderly or very young
- People with asthma, chronic bronchitis, diabetes, heart or kidney disease

for five days, beginning treatment within 48 hours of the onset of symptoms.

Over in the US, Roche is about to launch a world's first 'flu pill'. The active ingredient of Tamiflu is oseltamivir, a member of the same family of drugs as Relenza (zanamivir) and it prevents the flu virus replicating itself and spreading to other cells. Tamiflu will be available across the US in time for the 1999-2000 flu season. Roche is hoping to market it in the UK at the end of 2000/beginning of 2001.

Action points

Now that you've updated your knowledge on colds and flu, why not put your learning into practice?

- The Government is spending over £1 million this winter on campaigns to encourage patients to visit the pharmacy. Why not sit down with your pharmacist and work out a winter ailments action plan for your pharmacy? Think about window displays, products to recommend, how are you going to explain the issues surrounding antibiotic prescribing and resistance
- Your pharmacy could put together a winter survival kit – cold remedies, tissues, cough medicine, throat lozenges, essential oil inhalant – or draw up a checklist for customers who may only come in for one item
- Each week over the peak cold and flu period, *Chemist & Druggist* in association with Warner-Lambert, publishes a cough, cold and flu forecast which gives you advance warning of any increase in these respiratory illnesses and hopefully increased sales of winter remedies. Ask your pharmacist if you can have a look at the chart and see if it reflects the situation in your area

Test your knowledge

Now that you've updated your knowledge on colds and flu, why not see how much you can remember? Turn to the question paper on page 46

... heavy cold or even flu.

Think flu relief, think Benlyn Four Flu. This unique formulation has a 4 way action to treat the four major symptoms of flu - fever, body pains, cough and congestion - as well as heavy colds and so aid restful sleep. What's more, Benlyn Four Flu is available in three of your customers' favourite formats. Good reasons to think Benlyn Four Flu first.



Diphenhydramine, Paracetamol, Phenylephrine

Diphenhydramine, Paracetamol, Pseudoephedrine Hydrochloride



The name to think of first

Benlyn Four Flu Tablets, Liquid and Hot Lemon Drink. Presentation: Tablets: Orange tablets containing 12.5mg Diphenhydramine HCl, 500mg Paracetamol and 22.5mg Pseudoephedrine HCl per tablet. Liquid: Orange liquid containing 25mg Diphenhydramine HCl, 1000mg Paracetamol and 45mg Pseudoephedrine HCl. Hot Drink: Yellow powder for reconstitution. Sachet contains 10mg Paracetamol, 25mg Diphenhydramine HCl and 12mg Phenylephrine HCl. **Uses:** Symptomatic relief of colds and flu. **Dosage:** Tablets: Adults: 2 tablets 4 times daily; children aged 6 - 12 years: 1 tablet 4 times daily; children under 6 years: not recommended. Liquid: Adults: 20ml 4 times daily; children aged 6 - 12 years: 10ml 4 times daily; children under 6 years: not recommended. Hot Drink: Adults and children over 12 years: One sachet dissolved in a cup of hot water every 4 - 6 hours. **Contra-indications:** Hypersensitivity, severe hyperthyroidism, hypertension or coronary artery disease. Not to be taken by patients who have taken MAOIs in the preceding 2 weeks. **Precautions:** Caution in cardiovascular disease, hypertension, hyperthyroidism, pregnancy, static enlargement, liver disease, renal disease, glaucoma or diabetes. May cause drowsiness. Avoid alcohol and drugs with anti-cholinergic properties. **Adverse effects:** Occasionally skin rash, nausea, headache, dizziness, sedation, tachycardia and insomnia. **Price (ex-VAT):** Tablets: £3.57. Liquid 200ml: £3.91. Hot Drink £2.25. **Legal category P. Product licence holder:** Warner Consumer Healthcare, Eastleigh, SO53 3ZQ. **Product licence number:** Tablets: 15513/0058. Liquid: 15513/0057. Hot Drink: 15513/0060. **Date of preparation:** October 1999.

Itchy, scratchy, sore and tickly

Sore throats are generally self-limiting conditions that require symptomatic relief which is why the market for sore throat remedies is now worth over £100 million

When eating bread feels like swallowing glass and a few sentences bring tears to your eyes, a sore throat doesn't seem like a minor ailment.

Most sore throats are caused by a viral infection and are usually associated with a cold or flu. The resulting inflammation of tissues in the larynx, pharynx and tonsils cause the symptoms we associate with sore throats.

Uncomplicated sore throats usually last for three to five days and patients usually complain of a dry tickly throat, a raw sensation, sharp pain on swallowing and sometimes hoarseness. Unfortunately for cold and flu sufferers the sore throat can be further aggravated by coughing and mucus associated with colds or flu.

As most sore throats are caused by viral infections, antibiotics are not appropriate treatment. This winter the government is running a campaign to discourage the public from expecting doctors to prescribe antibiotics for sore throats. Unnecessary use of these drugs means they are less likely to work effectively when they are needed.

As a result you will probably find more customers asking for your advice and recommendation of products to treat sore throats.

What's on offer OTC

Although OTC preparations cannot cure a sore throat, they can offer relief from the pain and discomfort patients experience. A range of presentations are available – pastilles, lozenges, sprays and mouthwashes – promising a variety of actions such as anaesthetic, soothing, decongestant and anti-bacterial.

Sucking pastilles or lozenges stimulates the production of saliva which lubricates the throat and has a soothing effect.

Anti-bacterial agents may be included in the formulation to help reduce the risk of the sore throat becoming an infection. Check packs for ingredients such as:

- **Benzalkonium chloride** (Beechams Throat-Plus Lozenges, Bradasol Sugar Free Lozenges)
- **Hexylresorcinol** (Lemsip Sore Throat Anti-bacterial Lozenges, TCP Sore Throat Lozenges, Beechams Throat-Plus Lozenges)
- **Dequalinium** (Dequadin, Mac Sugar Free)
- **Cetylpyridium** (Merocets)
- **Amylmetacresol** (Strepsils Original, Strepsils Sugar Free, Mentholatum Antiseptic Lozenges).

As most lozenges are now formulated to be pleasant tasting you may need to remind customers that medicated lozenges and pastilles are not sweets and should be slowly sucked for maximum benefit.

If the pain associated with the sore throat is particularly severe, you should recommend a product containing a local anaesthetic which will numb the throat and tongue. Active ingredients to check for include:

- **Benzocaine** (AAA Mouth & Throat Spray, Dequacaine, Merocaine, Vicks Ultra Chloraseptic Throat Spray, Tyrozets)
- **Lignocaine** (Bradasol Plus)
- **Lidocaine** (Strepsils Pain Relief Plus, Strepsils Pain Relief Spray).

However, make sure you ask who the anaesthetic product is for as loss of sensation can make swallowing difficult in children and old people in particular. Sprays can generally be used in children over six.

Gargling with a solution of aspirin is an effective means of delivering an anti-inflammatory to the area where it needs to act. A dilute solution of TCP (one part TCP, five parts

water) has an antiseptic action and also freshens the breath.

If a sore throat is accompanied by nasal congestion, products such as Strepsils Menthol and Eucalyptus, Mentholatum Antiseptic Lozenges or Halls Mentho-Lyptus, release vapours which help you breathe more easily.

Research carried out by Crookes Healthcare found that about 50 per cent of consumers have a cough at the same time as a sore throat. This is hardly surprising as constant coughing is bound to irritate the lining of the throat, so it may be appropriate to recommend a cough suppressant (see our feature on page 36).

Smoking can also irritate an already inflamed throat so advise the sufferer to stay out of smoky atmospheres, or if smokers, to cut down or give up.

Refer

Although most sore throats are caused by viral infections which do not respond to treatment with antibiotics, some sore throats can be caused by bacterial infections and require antibiotic treatment.

In such cases the patient will probably have a raised temperature or have a very severe sore throat which came on suddenly. A persistent sore throat that lasts more than five days may be a symptom of a more serious condition so the patient should be referred to their GP.

Test your knowledge

Now that you've updated your knowledge on sore throats, see how much you can remember. Turn to the question paper on page 46

STREPSILS EXTRA – PRODUCT INFORMATION

Throat Lozenge containing Hexylresorcinol B.P. 2.4mg.

Indications: As an antiseptic and local anaesthetic for the relief of sore throat and its associated pain.

Dosage: Adults and Children over 6 years: one lozenge to be dissolved slowly in the mouth every three hours as required.

Do not take more than 12 lozenges in 24 hours.

Contraindications: Hypersensitivity to any of the ingredients.

Children under 6 years of age.

Precautions: If symptoms persist consult your doctor.

Undesirable effects: Occasional hypersensitivity reactions.

Legal Classification: GSL.

Licence Holder: Ernest Jackson & Co Ltd, Devon, EX17 3AP.

Licence Number: PL 00094/0018.

Price: £2.15 for 24 lozenges.

Date of preparation: June 1998.

STREPSILS PAIN RELIEF SPRAY – PRODUCT INFORMATION

Throat spray containing Lidocaine hydrochloride 2%w/v.

Indications: For the symptomatic relief of severe sore throats.

Dosage: Adults and Children over 12 years: Three sprays.

Aim nozzle at back of throat and spray on the affected area. Repeat the dose every three hours as needed up to a maximum of six times in 24 hours.

Should not be given to children under 12 years of age.

Contraindications: Hypersensitivity to any of the ingredients.

Patients suffering from asthma or bronchospasm.

Children under 12 years.

Warnings & Precautions: Do not use if sensitive to any of the ingredients.

Avoid contact with the eyes.

Do not inhale whilst using the spray.

Do not exceed the stated dose.

Seek medical advice if symptoms persist or are accompanied by high fever, headache, nausea or vomiting.

Seek medical advice before using if you are pregnant, breast feeding or receiving medical treatment.

Strepsils Pain Relief Spray may cause numbness of the tongue and therefore care should be taken in eating and drinking hot foods.

Undesirable effects: Occasional hypersensitivity reactions.

Legal Classification: Pharmacy.

Licence Holder: Crookes Healthcare Ltd, Nottingham NG2 3AA.

Licence Number: PL 00327/0089.

Price: £4.29 for 20ml.

Date of preparation: July 1999.

STREPSILS PAIN RELIEF PLUS LOZENGES – PRODUCT INFORMATION

Throat Lozenge containing:

Amylmetacresol B.P. 0.6mg

2,4-Dichlorobenzyl alcohol 1.2mg

Lidocaine Hydrochloride Ph Eur 10 mg

Indications: For the symptomatic relief of mouth and throat infections including severe sore throat.

Dosage: Adults and Children over 12 years: one lozenge to be sucked slowly every two hours as required.

No more than 8 lozenges to be sucked in any 24 hours.

Contraindications: Hypersensitivity to any of the ingredients.

Not recommended for children under 12 years.

Precautions: If symptoms persist or are accompanied by a high fever consult your doctor.

Consult your doctor before taking if you are pregnant or breast feeding.

Undesirable effects: Occasional hypersensitivity reactions.

Legal Classification: Pharmacy.

Licence Holder: Crookes Healthcare Ltd, Nottingham NG2 3AA.

Licence Number: PL 00327/0078.

Price: £2.49 for 24 lozenges.

Date of preparation: July 1999.

STREPSILS – PRODUCT INFORMATION

Throat Lozenge containing:

Amylmetacresol B.P. 0.6mg and 2,4-Dichlorobenzyl alcohol 1.2mg

Indications: For the symptomatic relief of mouth and throat infections.

Dosage: Adults and Children: one lozenge to be dissolved slowly in the mouth every two to three hours as required.

Contraindications: Hypersensitivity to any of the ingredients.

Precautions: If symptoms persist consult your doctor.

Undesirable effects: Occasional hypersensitivity reactions.

Legal Classification: GSL.

Licence Holder: Crookes Healthcare Ltd, Nottingham NG2 3AA.

Licence Number: PL 00327/5911R.

Price: £1.85 for 24 lozenges.

Date of preparation: July 1998.

Understanding a sore throat

With the onset of winter you can expect to see many more customers presenting with ailments such as sore throats. Did you know that every year

40 million adults seek advice for a sore throat, and that the cost of GP consultations alone for sore throats is £60 million per year? In many cases, a sore throat can be successfully self-treated, with no need for a visit to the doctor or for antibiotics. Dr Lester Russell, a GP with a special interest in ear, nose and throat, says: "People ask their doctor for antibiotics when they should be treating their sore throats themselves."

But in order to advise your customers on the best way to treat a sore throat, and to know when you should be referring them to their GP, it helps to understand how the throat works and what can cause infection.

How the throat works

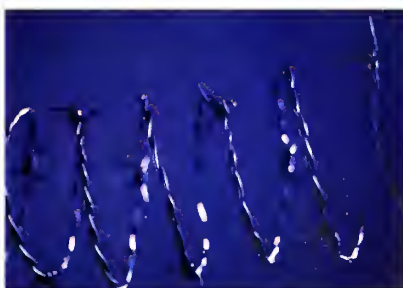
Your throat runs from the back of your mouth to the top of your respiratory and digestive tracts, and comprises the tonsils, pharynx and larynx. Your throat has an important function, helping to filter out potentially harmful bacteria which can lead to infection.

- The tonsils lie one on each side at the back of the throat and play an important part in fighting off infection.
- The pharynx stretches from the back of the nose to the larynx and many sore throats are due to inflammation of this area.
- The larynx, or voice box, is where our vocal chords are found. When this part of the throat is inflamed the voice becomes hoarse or can disappear altogether.

The sore throat explained

Pain or discomfort in the throat is a possible sign that your immune system is under attack from either a virus or a bacteria. The discomfort is the result of various parts of the throat becoming inflamed. There are several causes of sore throats and the main ones include:

- **Infection.** The majority of sore throats are due to a viral infection, such as those which cause colds and flu. These are especially common during winter when we spend more time indoors in close contact with others, enabling germs to spread rapidly. A viral infection can sometimes lead on to a more serious bacterial infection once the immune system has weakened. Signs of this include a high temperature and change in colour of the mucus which is coughed up.



- **Pollution** contaminates the air we breathe and can irritate the throat.
- **Cigarette smoke** is a major irritant of the airways and makes both viral and bacterial infection more likely.
- **Changes in temperature**, such as going from warm centrally heated rooms to the icy outdoors, can affect the throat.
- **Overuse of the vocal chords**, through singing or shouting, can lead to inflammation.

Types of sore throats

All sore throats are not the same, so will require different treatments. The three main types you're likely to see in the pharmacy are:

1. Dry, itchy sore throat.

Symptoms include discomfort when swallowing and talking, and a dry, irritated feeling. The best treatment for this type of sore throat is an antibacterial lozenge to destroy the bacteria which is causing the soreness, such as Strepsils lozenges, which combine two anti-bacterial ingredients. Variants include Strepsils Original, Strepsils Vitamin C, and Strepsils Honey & Lemon, with its soothing action.

2. Sharp, stabbing sore throat.

Symptoms include redness and soreness at back of throat, pain when swallowing and talking. For this type of sore throat, recommend an antiseptic to fight the bacteria causing the infection combined with a local anaesthetic to gently numb the pain, such as Strepsils Extra.

3. Swollen and inflamed sore throat.

Symptoms include redness and soreness, or red spots at the back and roof of the mouth; white and/or red patches on swollen tonsils; difficulty swallowing and talking; throat feels lumpy and tight. If the cause is a viral infection, then antibiotics will make little difference. Instead, recommend an anaesthetic treatment to give rapid pain relief. These include Strepsils Pain Relief Spray, and Strepsils Pain Relief Plus lozenges, both containing lidocaine.

When to refer

Sometimes a sore throat should be treated by a doctor. Cases where you should refer a customer to their GP include:

- if it persists longer than 7-10 days.
- if there is difficulty in breathing
- pronounced difficulty in swallowing
- stiff neck and severe headache
- earache
- rash
- high temperature
- blood in saliva or phlegm
- lump in the neck
- hoarseness or mouth ulcers lasting over 2 weeks.

Visit the Net for help

www.strepsils.com is a website devoted to helping and advising the sore throat sufferer. New "flash" technology and special animations allow users to travel through the throat during the course of an infection, helping them to understand what is causing their sore throat. By filling out a questionnaire, users can identify which type of sore throat they have, and are then recommended an appropriate treatment. The website also offers fast-track information for key users such as mothers, smokers, frequent sufferers and sports enthusiasts.

Strepsils throatcare cards

The makers of Strepsils have produced a set of nine easy to read information cards, which explain the different types of sore throat, their causes and suggest remedies for relief. The packs are available from Strepsils Understanding Sore Throats, 5th Floor, 35 Red Lion Square, London WC1R 4SG.

I can hear you breathe

Consultant pharmacist *Mary Allen* takes a look at respiratory problems you often see or, more likely, hear in the community pharmacy



It's THAT time of year again when almost everyone seems to have a cough or cold – and that includes the customers, the staff and the family back home. For most people, a cough is nuisance lasting only a few days, but sometimes coughs and symptoms affecting breathing can indicate other problems.

Many customers will visit your pharmacy to purchase OTC cough medicines, and most will gain symptomatic relief from these. Some will need to see their doctors for further investigation – knowing when to refer customers needs special care.

Back to basics

The respiratory system is divided into two parts for

medical purposes – the upper and lower respiratory tracts, which between them include all the respiratory components from the nose to the lungs (see p37).

In general, the upper respiratory tract involves the bits down to the larynx (or voicebox), while the lower tract includes the lungs and the various bronchial tubes. Upper respiratory tract infections cause the symptoms that we so often see in the pharmacy in the winter months – sore throats, coughs, colds and so on.

While a cough is the most common symptom of respiratory disease, it can have many causes – not all connected with respiratory infection. When a customer asks for advice or medicine

for a cough it is important to find out as much as you can – remember the WWHAM approach. For example, a dry cough has been found to be a side-effect of a group of medicines used to treat cardiovascular problems.

Recurrent coughs in children may be indicative of asthma. In frail adults, a cough may be a symptom of worsening congestive heart failure, or lung cancer. So you can see that some detective work is necessary to ensure that those customers who may have something more problematic than a nuisance cough get to see their doctors.

Classifying coughs

Coughing occurs when sensitive receptors in the

lining of the respiratory passages are stimulated chemically or mechanically by secretions, foreign bodies or cigarette smoke.

These receptors send messages along nerve fibres to a place in the brain known as the cough centre. The centre activates messages down other nerves to the diaphragm, and the abdominal and chest muscles. This results in air being rapidly expelled from the lungs. Coughing is a reflex action, helping the body to get rid of unwanted substances.

A cough associated with a cold may be non-productive (dry), but more usually it is productive. The cough results from viral irritation of the lining of the throat and



airways, causing the lining to swell and produce mucus. If the viral infection is mainly in the nasal passages, the mucus can drip down the back of the throat, triggering the protective cough reflex. A chesty cough is caused by mucus formed lower down the tract, in the upper part of the airways, which then becomes clogged up. Mucus in the airways is known as sputum.

Whether dry or productive, viral coughs are usually worse at night. They don't usually last longer than a couple of weeks, but they can be quite debilitating if they are causing loss of sleep. A night-time cough in children can also indicate asthma (see below) so you should always bear this in mind if customers repeatedly want cough medicines for their children.

In the case of productive coughs, it can be helpful to ask about the nature and quantity of sputum produced. A small amount of clear sputum usually indicates catarrh produced higher up in the respiratory tract and which has then dripped down the back of the throat. Sometimes it may be due to mucus produced high up in the bronchial passages. Coloured (green or yellow sputum) indicates that there is active infection present. The presence of blood is a danger sign needing medical referral.

Remember that some customers asking about coughs may be smokers. Smokers often have morning

coughs with little sputum. Smokers asking for advice about coughs need encouragement to quit the habit – their coughs won't get better while they continue to smoke!

A worsening cough can be an indication of serious illness, including lung cancer, so it is important to establish how long the person has had the cough and whether it is getting worse. Ninety per cent of lung cancer cases are caused by smoking and more than 40,000 cases are identified each year in the UK (which means an average of four customers per year per pharmacy). Macmillan Cancer Relief produce a very good, if scary, leaflet entitled 'No time to draw breath? What every smoker should know', available from Macmillan Cancer Relief, Anchor House, 15-19 Britten Street, London SW3 3TZ.

Antibiotic anger

Since, for most people, coughs are the result of a viral infection, treatment is usually just a case of waiting for it to clear up and minimising the discomfort in the meantime. You may be faced with angry customers who tell you that their GPs have refused to prescribe antibiotics, but doctors have good reason to refuse. Antibiotics don't have any effect on viral infections, so customers need reassurance that time and symptom control are all that is needed.

Continued on P38 →

DO YOU STILL RECOMMEND THIS?



WHEN YOU COULD RECOMMEND THIS



CLEARWAY™ steam inhaler + inhalant oil

Inhalation of steam with aromatics has been recommended by doctors for generations but only recently has it been possible to do this easily, safely and effectively, using the **Clearway Steam Inhaler**.

Clearway Steam Inhaler was designed and developed by a community pharmacist to recommend to sufferers from **catarrh, sinusitis, coughs and colds** instead of the traditional leaning over a bowl of hot water with a cloth draped over the head

It is effective, safe, compact, easy to use, can be used by children, does not ruin hair styles nor cause unpleasant flushing of the face, is ideal for recommendation by a pharmacist or by an assistant with the pharmacist's approval, if appropriate

Recently introduced, **Clearway Inhalant Oil** is specially formulated for use with the inhaler and creates an additional sale and encourages repeat business. The inhaler sells for £4 65, the oil for £1 89, both are available from pharmacy wholesalers

Continued from P37

In fact, using antibiotics probably does more harm than good, given the widespread concerns about antibiotic resistance. Last month, the Government launched a £1.3 million public education campaign to tell the public that antibiotics do not work on coughs, most colds and sore throats.

OTC treatments

Cough medicines fall largely into one of two groups – those used to treat productive coughs and those used to suppress dry tickly coughs. It's important to establish what kind of cough the customer has – remember that a cough is a protective reflex action which helps the body to get rid of whatever is causing it, so suppressing this isn't always a good thing.

A productive cough needs to be encouraged – suppression could result in retention of mucus in the lungs leading to secondary infection. A dry irritating cough may, on the other hand, benefit from suppression – it usually serves little purpose and can be distressing.

● Cough suppressants act on the cough centre in the brain, reducing the nerve impulses which produce coughing. Most suppressants are opioid drugs such as codeine, pholcodine and dextromethorphan. They should be used only when dry coughs are troublesome and should never be used in chesty cough.

They can cause constipation and drowsiness so should be used with care. Because they are related to morphine (although they are much weaker) they can be abused, so keep a look out for frequent buyers and let your pharmacist know. Pholcodine and dextromethorphan have fewer side-effects, and are less likely to be abused than codeine, which is only rarely used these days for cough suppression.

Products: Benylin Dry Coughs Non-drowsy, Covonia Bronchial Balsam Dry Cough Liquid, Robitussin for Dry Coughs.

● Expectorants are useful for chesty coughs, and are thought to help break up mucus and expel it from the airways. They include guaiphenesin, ipecacuanha, squill and ammonium chloride. Guaiphenesin is

probably the most effective and is contained in many of the over-the-counter products available in pharmacies.

Products: Actifed Expectorant, Lemsip Chesty Cough, Meltus Adult Expectorant for Chesty Coughs and Catarrh.

Have a look at the cough medicines on your shelves, and learn which they contain.

Expectorants often work better if taken in a small volume of warm water, so tell your customers this. Cynics suggest that the effect of the warm water on the airways may be at least as effective as the action of the expectorant drug.

Water itself does help clear the lungs – by keeping the lung tissues hydrated and diluting any thick sputum which might be present, so always advise customers to drink plenty of fluid if they complain of chesty coughs.

● Steam inhalation can also help, with or without volatile oils such as eucalyptus or menthol.

Pharmacist Geoff Tomlinson often recommended steam inhalation to patients suffering from coughs, colds and catarrh but realised that many customers didn't enjoy leaning over a bowl of hot water with a cloth over their head so he set to work to create an alternative. By taking an invalid feeding cup, a child's oxygen-giving set mask and with the help of Black & Decker, he created the Clearway Steam Inhaler (£4.65) which can be used in combination with the Inhalant Oil (£1.89).

● Syrup or glycerol, which coat the mucus tissues and help to soothe the throat, are other useful ingredients to include. Simple linctus and Glycerine, lemon and honey are good examples.

● Lozenges can be useful, by stimulating the production of saliva which soothes the throat. Some contain low doses of cough suppressants, which may be helpful, but are sometimes too low to suppress the cough, yet contain enough of the active ingredient to cause constipation!

● Antihistamines are sometimes included in cough remedies. They may be helpful in treating cough associated with allergic conditions and postnasal drip. They shouldn't be used in people with glaucoma (a disease of the eye) or in men with prostate problems as

they can make these conditions worse.

Some cough products on your shelves will contain a combination of ingredients, and while some are useful, others seem to contradict each other. You should discuss this with your pharmacist – it doesn't seem sensible to sell products containing a cough suppressant combined with an expectorant, for example.

It's a good idea to decide on a standard approach within your pharmacy for which products to recommend for different coughs. Most of the branded products such as Benylin, Actifed and Tixlylix tend to include a range of medicines for dry or productive coughs. Being aware of the different types and when they should be used will help you make informed choices when customers ask for advice.

Croup

A respiratory problem of concern in children is croup which is a complication of some upper respiratory tract infections, caused by inflammation of the vocal cords and epiglottis (in lay terms, the dangly bit at the back of the throat!) resulting in narrowing of the airways.

Children under three years old are the most affected. It causes hoarseness of the voice and a barking cough. As the airways become more obstructed, breathing becomes difficult and noisy. It can be very frightening, and in severe cases a tracheostomy (a surgical procedure) must be performed to open up the airways, as the child may be at risk from lack of oxygen.

Sufferers of less severe croup often benefit from increased humidity – so parents should be advised to boil kettles (with care to avoid accidents) in bedrooms, or to place wet towels on central heating radiators. Steam inhalation also helps. The obstructive stage of the illness is usually short-lived, but the associated cough may persist for up to two weeks.

Finally

Being aware of the different types of coughs and the best remedies to relieve symptoms will help you to help your customers make informed choices. By knowing when symptoms may suggest more serious illness, you can help people get early diagnosis and treatment.



Asthma

Children with recurrent coughs and related symptoms may have undiagnosed asthma. Around half of the people who develop asthma in childhood will be free of attacks by the time they are 20 years of age. Early diagnosis allows opportunities for better patient education and management of the condition.

Asthma is a reversible disease of the airways involving breathlessness or wheezing caused by an increased response in the airways to various stimuli, such as exercise, infection, stress or allergy.

Anyone buying cough medicines on a regular basis, especially for children, should be referred to their GP. Wheeziness in children is often presumed to be due to a respiratory infection when it may be due to asthma – so if your customers report that their child has had several courses of antibiotics but is no better, then your pharmacist should refer them to the GP. Asthma can be diagnosed using a simple test which measures Peak Flow Expiratory Rate – this simply measures the efficiency of the patient's lungs in breathing out, and involves breathing into special tube known as a peak flow meter. Your pharmacist will have some of these in the dispensary so ask if you can see one.

Test your knowledge

Now that you've updated your knowledge on respiratory problems, see how much you can remember. Turn to the question paper on page 46



Whichever way you look at it

we're committed to Meltus in Pharmacy

This winter sees our biggest Meltus campaign ever, with our 7th consecutive year on TV, and again a cat plays a role your customers will remember.

In fact, last year's campaign drove consumer purchases up by 25%* - and this success is set to continue.

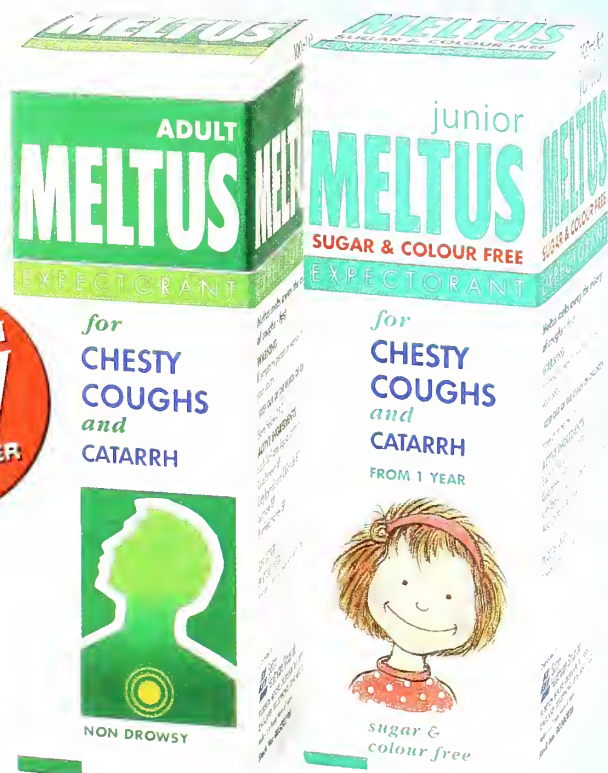
Meltus continues to be the fastest growing major cough brand in Pharmacy** offering effective relief for the whole family. And we remain committed to pharmacy by offering you excellent profit deals all year round.

So whichever way you look at it,
Meltus is the cat's whiskers.

MELTUS

Helps Melt Away Coughs - **Fast**

SSL International plc
Meltus is a Trade Mark of Seton.



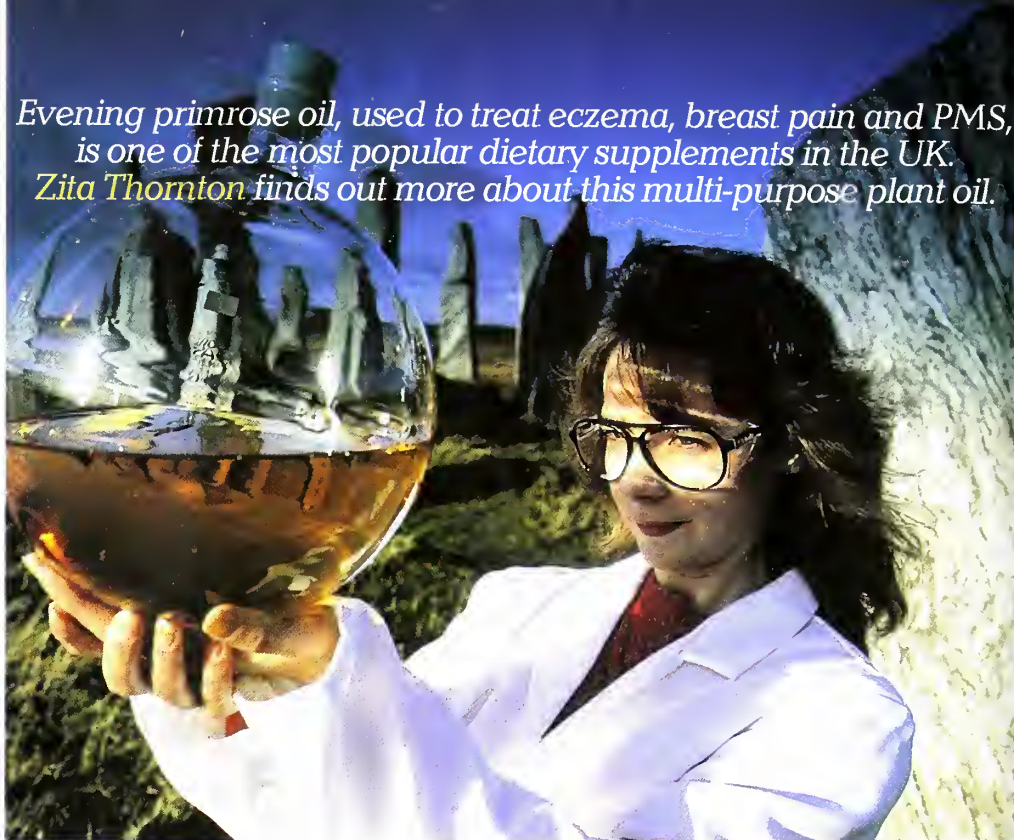
ADULT MELTUS EXPECTORANT FOR CHESTY COUGHS AND CATARRH ESSENTIAL PRODUCT INFORMATION. Presentation: Oral Liquid. Each 5ml contains 100mg Guafenesin BP, 2.5mg Cetylpyridinium Chloride BP, 1.75g Sucrose BP, Purified Honey BP. **Indications:** For the symptomatic relief of coughs and catarrh associated with influenza, colds and mild throat infections. **Dosage and Administration:** Adults and Children aged 12 years and over: one or two 5ml spoonfuls taken and swallowed slowly every three or four hours. Not recommended for children under 12 years. **Contraindications, Warnings etc:** Contraindications: None known. Warnings: Not suitable for children under 12 years. Very large doses can cause nausea and vomiting. Gastro-intestinal discomfort and mild drowsiness have been reported. **Use in pregnancy and lactation:** No known contraindications. **Side effects:** None known. **Legal Category:** GSL. **Packs:** 100ml and 200ml. **Price:** 100ml RSP £3.05, 200ml RSP £4.45. **PL Number:** 0338/5026R. **PL Holder:** Cupal Limited, King Street, Blackburn BB2 2DX. **Date of Preparation:** September 1999. **Further information is available on request from SSL International Tubitan House, Oldham OL1 3HS.**

JUNIOR MELTUS SUGAR & COLOUR FREE EXPECTORANT FOR CHESTY COUGHS AND CATARRH ESSENTIAL PRODUCT INFORMATION. Presentation: Oral Liquid. Each 5ml contains 50mg Guafenesin BP, 2.5mg Cetylpyridinium Chloride BP, Alcohol. **Indications:** For the symptomatic relief of coughs and catarrh associated with influenza, cold and mild throat infections. **Dosage and Administration:** To be taken three or four times daily. Children over 6 years: Two 5ml spoonfuls, then 1-6 years, one 5ml spoonful. Children under 1 year: On medical advice only. **Contraindications, Warnings etc:** Contraindications: None known. Warnings: Children under one year on medical advice only. Very large doses can cause nausea and vomiting. Gastro-intestinal discomfort and mild drowsiness have been reported. This formulation is not suitable for adults. **Side effects:** None known. **Legal Category:** GSL. **Packs:** 100ml. **Price:** RSP £2.75. **PL Number:** 0338/0086. **Holder:** Cupal Limited, King Street, Blackburn BB2 2DX. **Date of Preparation:** September 1999. **Further information is available on request from SSL International plc, Tubitan House, Oldham OL1 3HS.**

*Nelson Soltes Counterpoint season 98/9 vs season 97/8 **Independent Audit MAT June 1999

Yellow fever

Scotia Pharmaceuticals



Evening primrose oil, used to treat eczema, breast pain and PMS, is one of the most popular dietary supplements in the UK. Zita Thornton finds out more about this multi-purpose plant oil.

Evening primrose oil is well known as a supplement for women, especially to counteract the symptoms of PMS. However, it's benefits are much more wide reaching and can help those suffering from a range of conditions including eczema, multiple sclerosis, arthritis, diabetes and attention deficit disorder.

Fields of gold

Named after a plant with bright yellow petals that originated from Central America, evening primroses are now grown all over the world. They came to England in the 18th century on cotton cargo ships, which is why they can still be found growing around ports such as Liverpool.

The bright yellow flowers are said to open only after 6 o'clock in the evening – hence the name.

The American Indians used the plant as medicines to treat wounds, skin disorders, infections and asthma, but it wasn't until 1919 that the first detailed analysis of the oil contained within its seeds was made. They were found to be rich in fatty acids, including one never seen before.

Many years later, in the 1960s, this was named gamma linoleic acid (GLA) and scientists started to investigate its therapeutic uses.

Linoleic acid is an essential fatty acid with an

important role for our tissues and cell structures. We do not produce it in our bodies but it can be obtained by eating seeds, pulses, nuts and corn oil.

Linoleic acid is converted in the body into GLA, which is then converted to prostaglandins to regulate the functioning of every organ. It also has an effect on bodily functions including blood pressure, digestion and inflammation.

However, the conversion of GLA is hindered by hormonal imbalances, vitamin deficiencies, diabetes, smoking, viral infections, pollution, alcohol and diets rich in saturated fats.

This deficiency of GLA can result in menopausal and pre-menstrual problems, eczema, aching and inflamed joints and hyperactivity in children.

Fortunately, when our body fails to convert linoleic acid into GLA, it will accept a supplement of GLA. However, there are few sources we know of, hence the importance of evening primrose oil. Other sources are borage, starflower – the richest natural source – and blackcurrant.

Relief from PMS

Women who suffer from pre-menstrual syndrome could experience any of the following symptoms:

- Headaches
- Sore breasts
- Mood swings
- Clumsiness
- Irritability

Aims

After reading this article on evening primrose oil you should:

- Know where the oil comes from and what it contains
- Understand why GLA is important for healthy functioning of the body, and the symptoms associated with GLA deficiency
- Be aware of chronic conditions that may benefit from supplementation with evening primrose oil

- Lack of concentration
- Fluid retention.

Sufferers are thought to be low in essential fatty acids and consequently low in prostaglandin. This results in an excess of the female hormone prolactin which causes many of the symptoms.

By taking an evening primrose oil supplement, the conversion to prostaglandin is made more successful. Breast pain, in particular, responds well to evening primrose oil and an EPO-product Efamast is licensed for the treatment of cyclical and non-cyclical mastalgia.

In severe cases, PMS sufferers can take two 500mg capsules of evening primrose oil a day, but one daily 250mg dose works well for many.

The capsules can be taken a few days before the symptoms start until the start of the period. However, it can take up to three months

Continued on P42

Choosing your next holiday is now child's play



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flights for the next 25 years

BRITISH AIRWAYS



Continued from P40

for the effects to be noticed and it can be useful to take a daily starter dose of one 250mg capsule for the first three months.

Efamol produces a supplement which contains evening primrose oil with other vitamins and minerals to increase the effectiveness of GLA. Efamol PMS Control includes vitamin B6 which has also been shown to be beneficial in relieving PMS.

Clear skin with EPO

There have been many trials of evening primrose oil for treating eczema which seems to have no apparent cause. A study ten years ago, on children, found a dramatic improvement in their condition after only one month's use of evening primrose oil.

Dosage is quite high but evening primrose oil for use by eczema sufferers is available on prescription. It is recommended that the course be started with six 500mg capsules a day, reducing the dose as the condition clears up.

However, some studies show a relief of itching at a dosage of 2g per day with the higher level being effective in reducing scaling. Treatment may need to be continued for at least three months to see results.

Evening primrose oil can be used for babies and children, too. It is thought that some babies develop eczema when they stop breastfeeding as mother's milk contains high levels of GLA. When this supply stops so does the supply of GLA. For babies, evening primrose oil capsules can be pierced and the oil rubbed on to the baby's skin. Choose an unaffected area on the inner thigh, arm or tummy.

Evening primrose oil has a use in maintaining normal healthy skin by reducing moisture loss and strengthening cell walls, improving the appearance.

Inflammation

When the natural balance of the prostaglandin process is upset, inflammatory disorders such as rheumatoid arthritis can occur. This is normally treated with non-steroidal anti-inflammatory drugs (NSAIDs), but most of these inhibit all prostaglandin production and can cause gastric upsets. Taking daily evening primrose oil can provide a natural way to

Efamol



Bright yellow flowers of the evening primrose plant

restore prostaglandins production. However, there is a conflict as NSAIDs inhibit the effect of prostaglandin and evening primrose oil restores it.

A number of other inflammatory disorders, like irritable bowel disease, respond well to evening primrose oil.

Multiple sclerosis

Although little is known about the cause of MS, sufferers have been found to have lower than normal levels of linoleic acid in the central nervous system. MS is also more prevalent in countries where a diet high in saturated fats is eaten. Some patients have found a reduction in the severity and frequency of attacks when taking evening primrose oil along with a controlled diet. Patients with recent onset or less severe forms of the disease were found to be more likely to respond to treatment with EPO.

Diabetes

It is thought that a blockage in the linoleic acid to GLA conversion process affects the release of insulin, so taking evening primrose oil to aid that conversion could have a beneficial effect.

Diabetics also have lower levels of essential fatty acids so evening primrose oil can supplement this shortfall. Nerve damage and eye problems have been shown to slow down when the supplement is taken.

Other benefits

Other syndromes which have shown positive responses to the supplement are hyperactivity in children, Reynaud's syndrome, post viral fatigue and even in preventing a hangover when taken before a bout of heavy drinking. The recommended dose for this is six 500mg capsules before you start drinking.

Safety record

Evening primrose oil has a very good safety record with few side effects. Nausea, softening of stools and headache have been reported by some patients taking large doses. These effects generally go away when the dosage is reduced.

Evening primrose oil may be taken during pregnancy. In fact, Efamol produces a supplement, Efanatal, which combines the oil with fish oil following recommendations from the WHO.

There is a concern about evening primrose oil for those at high risk of epilepsy and in schizophrenic patients.

Evening primrose oil is usually combined with vitamin E to act as a natural anti-oxidant to stop the oil from becoming rancid.

As research continues into evening primrose oil, new uses for this versatile oil are bound to be revealed.

Action points

Now that you've updated your knowledge on evening primrose oil and its uses, why not put your learning into practice?

- Check your shelves to see what products you have that contain evening primrose oil and what strength they are

- Try to establish what condition customers are buying evening primrose products for and get some feedback from them on what doses they find effective, how long they have been taking it for, and if they suffer any side effects

- As many evening primrose oil products are classified as food supplements, the packs will not indicate why people take them or what dose should be taken. Discuss with your pharmacist the practicality of having a reference folder or book that customers could find more information in. 'Handbook of Dietary Supplements' by Pamela Mason is a useful guide to the vitamins and other health supplements

MOTILIUM 10 - ESSENTIAL INFORMATION

Presentation: Small film coated tablet contain domperidone maleate equivalent to 10 domperidone base. **Indications:** For the relief post meal symptoms of fullness, nausea, epigastric bloating and belching, occasionally accompanied by epigastric discomfort and heartburn. **Dosage and administration:** Adults and children over 16: up to one tablet (10mg) three times daily and at night when required. Maximum duration of continuous use is 2 weeks. **Contraindications:** Hypersensitivity to any of the components. Patients with any underlying gastrointestinal pathology, with prolactinoma, or with hepatic and/or renal impairment. **Precautions:** Patients who find they have symptoms that persist and are taking Motilium 10 continuously for more than 2 weeks should be referred to a GP. **Interactions:** Adverse interactions have not been reported in general clinical use. However there is the potential to alter the peripheral actions of dopamine agonists such as bromocriptine, including its hypoprolactinaemic action. Domperidone's actions on gastro-intestinal function may be antagonised by anti-muscarinic and opioid analgesics. May enhance the absorption of concomitantly administered drugs, particularly in patients with delayed gastric emptying. **Pregnancy and lactation:** Motilium should only be used during pregnancy on the advice of a doctor. Use by breast feeding women is not recommended. **Effects on driving ability and use of machinery:** Does not affect mental alertness. **Side effects:** Occasionally transient stomach cramps and hypersensitivity reactions (eg rashes) reported. At higher dosages and longer treatment durations than recommended a rise in serum prolactin has been reported which may, rarely, be associated with galactorrhoea, even less frequently, with gynaecomastia, breast enlargement or soreness; there have been reports of reduced libido. Domperidone does not cross the normally functioning blood-brain barrier and therefore is less likely to interfere with central dopaminergic function. However, a few extrapyramidal dystonic reactions, including instances of oculogyric crises, have been reported. Should treatment of dystonic reactions be necessary, domperidone should be withdrawn and an anticholinergic, anti-parkinsonian or benzodiazepine medication should be used. **Treatment of overdose:** If disorientation, extrapyramidal reactions or drowsiness occur following an overdose, the patient should be closely monitored and treated symptomatically. Administration of gastric lavage and activated charcoal may be helpful. Anticholinergic medication may be useful in managing extrapyramidal symptoms. **Price:** £3.95. **Category:** P. PL: 13249/0014 **PL holder:** Johns Johnson. MSD Consumer Pharmaceuticals, Enterprise House, Station Road, Loudwater, High Wycombe, Buckinghamshire HP10 8JH. **Date of preparation:** June 1998.



Whatever your customers call **FEELING SICK** there's one name to remember

Different customers call it different things. But they all know it's that 'nausea' feeling. And that the gassy, churning upset stomach symptoms they feel, often after meals, mean their natural stomach's digestive rhythm has slowed, and what goes in 'reverse'. Which is why you

should reach for Motilium 10. It's the only OTC treatment clinically designed to restore normal stomach rhythm in the right direction to clear the cause of their nausea.* So recommend Motilium 10. Because whatever they call that feeling, that's the one name you should remember.



**HELPS TO
CLEAR THE STOMACH**

Johnson & Johnson MSD
Pharmaceuticals

Only available through pharmacies. Further information is available from Enterprise House, Station Road, Loudwater, High Wycombe, Buckinghamshire HP10 9UF Tel: 01494 450778.

*Indicated for post prandial symptoms of nausea and other stomach discomfort symptoms of fullness, bloating and belching



Are you listening?

Questioning and listening are two essential skills for all pharmacy staff. Training consultant **Diane Bailey** offers some tips to improve the skills we so often take for granted.

Much of the communication which fills our everyday lives is about information: getting it, giving it, passing it on. Some of the remainder is about emotion: how we feel, how other people feel and how the feelings and emotions affect the things we do and our relationships with others.

There are two skills in particular which help with the communication of both information and feelings. These are questioning and listening. Let's start with listening because it is crucial to good communication. Experts have said that if we could all improve our listening ability by 10 per cent, that 50 per cent of communication breakdowns would disappear.

Hear and listen

People in general spend about 45 per cent of their time listening to what is going on. If you work in a pharmacy or other customer focused job, this percentage can be as high as 75 per cent. Despite this, listening is a skill which is very much taken for granted. We

presume that because we can hear, we can listen. This is very far from the truth. The old saying says 'You hear with your ears, you listen with your brain.'

The big difference between hearing and listening is that one is physical, the other is about interpretation. Listening involves you in trying to understand what the other person says and means.

Good listening is about not only the words people use, but the way they are said, the tone of voice, what is left unsaid and also what is suggested or communicated by the other person's body language. In fact you might even say that some listening is done by the eyes as well as the brain and the ears!

Active listening

Being a good listener is vital to good communication, it is also one of the greatest compliments we can pay other people. Being a good listener means being an active listener. You need to understand what the other person says and means but they need to know that you

are listening. The secrets of being an active listener are as follows:

● Concentrate

You just cannot listen effectively if you try to do something else at the same time. Give the speaker your full attention. Remember that the brain can absorb information three to four times more quickly than a person can speak, so if you find your attention wandering, bring it back to the speaker.

● Give your full attention

The speaker deserves your full attention, anything less is insulting and can lead to poor relationships because the other person feels undervalued. The time you spend listening will pay for itself because mistakes and confusion won't arise as they often do if you only half listen.

● Posture

Show your interest and concentration by your posture. Face the other person openly, lean slightly towards the other person if seated. Try to be relaxed and keep good eye contact. Avoid shuffling or fidgeting

and above all don't doodle.

● Neutral Responses

When listening use paralinguistic or non-verbal but vocal signals to encourage the speaker to carry on talking and to show that you're listening. "Ums" and "aahs" can show you are paying attention.

Incidentally you also need to watch for the other person's non-verbal and body language signals. These will often add to what their words tell you.

● Ask for clarification

Good listening can, strangely enough, involve you in speaking. Use questions to clarify anything about which you are unsure. The other person will not be offended or put off by such questions. In fact they will generally be reassured by the interest and commitment.

● Paraphrase

A very good way to show not only that you are listening, but that you have understood is to paraphrase what the speaker says to you. This just means saying back to the other person, in your own words, what they have just said to you.

● **Respond positively**
Give positive feedback and reactions before giving negative ones.

Barriers to listening

There are many barriers to good listening. They include:

- making hasty judgements
- not listening to problems
- being easily distracted
- taking words too literally
- hearing only what you want to hear
- physical factors, eg noise, levels of comfort
- dislike of the speaker
- lack of interest in subject
- daydreaming
- being impatient
- interrupting
- switching off
- interruptions
- being afraid of criticism
- prejudice
- boredom.

Effective listening

Listening is a skill we all take for granted. But listening is very different from hearing. Hearing is a physiological process – unless your hearing is impaired it will happen. Listening requires that you put some effort and energy into processing what you have heard. It has been said that we hear with our ears and listen with our brains.

Questioning

In talking about listening I mentioned the use of questions. Questioning is something we do all the time but often without thinking too clearly about what we want to achieve.

Questions achieve many results. These include:

- drawing out information, knowledge, experience, opinions
- exploring feelings, attitudes
- needs, stimulating thought and intelligent judgement
- clarifying an issue
- obtaining necessary information
- probing for further information
- showing interest
- managing the conversation
- interrupting (without seeming rude) an overly talkative customer
- finding out what the customer wants/expects you or your pharmacy to do.

Types of questions

There are a number of different types of questions, some useful, others less so.

Useful questions include:

Open
Probing
Reflective

Closed (see the questioning funnel, right)

Table 1: Do's and don'ts of effective listening

Do

Concentrate
Ask questions to clarify details
Lean forward to signal interest and attention
Summarise after each key point
Ignore a "bad" speaker in order to get through to the message
Hear the person through
Ask for something to be repeated if you are not clear
Make sure you understand a question before answering it

Don't

Allow your attention to wander
Assume you have been understood
Look bored
Wait for the end to summarise
Try to anticipate what is coming next

Interrupt or try to finish the other speaker's sentence
Allow the discussion to move on until you understand the previous point
Allow emotive words or phrases to irritate you

Good questioning techniques require people to think for themselves and to produce answers not suggested by your question.

Questions to be avoided:

Multiple or tower – people will generally only answer one question from the several you ask

Leading questions – you won't get an honest answer if you lead the other person

Counter-productive questions either make answering difficult for the customer, or which, by their shape, control the length and form of the reply or prejudice the reply which you are likely to receive.

Open questions

These, by provoking thoughtful answers, are useful in a discussion with an angry customer. They are particularly useful during the initial stages of the discussion to promote a good atmosphere, to 'set the scene' for the subsequent discussion. They tend to start with 'Who', 'What', 'Why', 'How' or 'When'. Examples of this type of questions are: "What exactly is the problem ...?" or "Who did you speak to?" They are also useful in introducing new topics later in the discussion or in

opening up an area for more detailed investigation, eg "What would you like to happen now?"

Open questions invite people to express their thinking clearly rather than allowing a yes or no or simple response.

Open questions prompt a fuller answer and are useful in conversation with someone in pursuing ideas and getting their views expressed clearly: "You mentioned earlier that the procedure should be changed, tell me what you would like to see done?"

Link – To create a smooth, logical flow, here you form the question by picking up the last response or an earlier response from the other person in order to move on in a desired or new direction, eg "A bit earlier you mentioned that you are angry because of the length of time you waited, exactly when did this happen?"

Compare can be used in a variety of ways to encourage a customer to make evaluations, for example on a before and after basis, "To what extent did taking the medicine relieve the pain?" or "What difference has changing to XYZ cream made to the rash?"

Clarify – It is vital you do not accept things at face value or continue the conversation when you are not clear what the other person means. To help, you can rephrase the speaker's statements in a bid to define the meaning they attach to them, eg "Are you saying that you see the length of wait as only a symptom of the real problem?" or "Let me see if I understand the problem as you see it ...?"

Be careful though that you do not start to put words into the speaker's mouth.

Probing questions

These are a type of open question but are used to narrow the search for information. You pick up on a clue or on an area of particular relevance and ask further questions about it: "You said that you waited two weeks for a reply, who had signed the letter?"

Reflective questions

Reflective questions are based on the principle of using the speaker's own phrases, turned into questions to show understanding and gain confirmation "So what you want is to ...?"

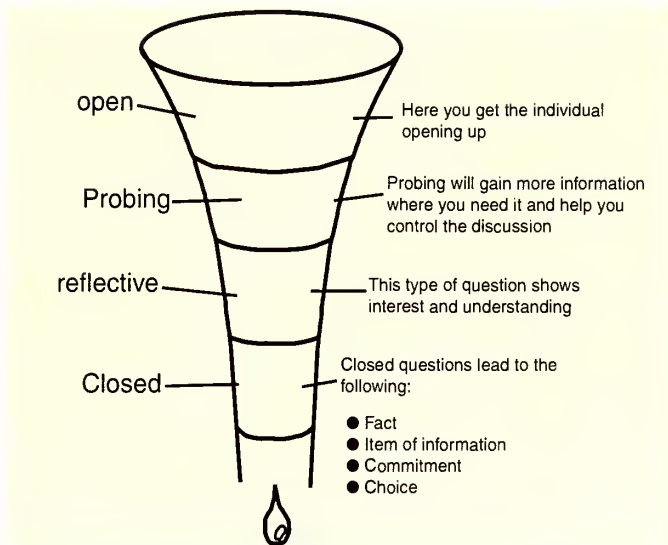
The closed question

This controls the length and form of the reply and only allows for brief response, such as "Did you discuss this at the branch?" The closed question can help someone make up their mind.

In conclusion

Questioning and listening are skills we all need. In the pharmacy, getting accurate information and responding to it is very important for the customer's safety and your own professionalism. Use the skills of questioning and listening to help you get the right information and choose the right response/reaction.

(Diane Bailey runs Diane Bailey Associates, a training consultancy in Rochdale)



The questioning funnel shows how to use questions to obtain information to gain commitment to action

Test your knowledge

Everyone in the healthcare team needs to continually review and add to their knowledge. You have done this by reading the informative and educational articles in this issue of *Over the Counter*. Now test your increased understanding by answering these simple questions

WINTER AILMENTS

1. Most sore throats are caused by
- Bacterial infections
 - Viral infection
 - Fungal infections



2. Why can sucking lozenges help a sore throat?
- It distracts you from the pain
 - It exercises your throat muscles

- c) It stimulates saliva which lubricates the throat

3. Antibiotics can be used to treat flu
- True
 - False
 - Only if they are used early enough

4. The use of antibiotics for colds, sore throats and flu is discouraged because
- Antibiotics are too expensive
 - There's a shortage of them this year
 - Bacteria are developing resistance to antibiotics

5. Which of these are expectorants?

- Guaiphenesin
- Ammonium chloride
- Pholcodeine

Not sure about one or two questions? Turn to our features on Colds, flu, sore throat and respiratory problems, beginning on page 30

Sponsored by Crookes Healthcare

Strepsils

WOMEN'S HEALTH

1. Pre-menstrual syndrome usually starts around
- Day 1 of cycle
 - Day 14 of cycle
 - Day 21 of cycle



2. Cystitis treatments are used to make the urine
- Less acidic
 - More acidic
 - More concentrated

3. Which of the following medicines can predispose a patient to thrush?
- Antibiotics
 - Analgesics
 - Anti-inflammatories

4. Pregnant women are
- More likely to develop thrush
 - Less likely to suffer thrush
 - Equally as likely to suffer thrush as non-pregnant women

5. Which of the following is an antifungal used to treat thrush?
- Uramazole

- Ectomazole
- Clotrimazole

6. Thrush sufferers should be advised to wear
- Nylon knickers
 - Cotton knickers
 - Tights

Check your answers at the bottom of the page – or go back to the feature on women's health on page 20

STRESS



Feeling better able to cope with the stress of working life? You must have read the article on page 27

1. Every day, how many people take time off work for stress-related illnesses?
- 2,700
 - 27,000
 - 270,000

2. What happens in your body when you become stressed?
- Heart beats faster
 - Muscles relax
 - Blood pressure rises

3. Which of these events is in the top ten of stress triggers?
- Having your car stolen
 - Prison sentence
 - Appearing on TV

If you're unsure about any answers, turn to page 27 for a quick reminder

Verity



I know that I should be working up some enthusiasm for the Christmas period, but I seem to have been distracted by lots of other things that are happening in the shop.

Some time ago, I was told by our pharmacist that, due to European legislation, dispensary medicines can no longer be packed in the pharmacy for over-the-counter sales. Customers will now have to buy an original pack with full patient information. I thought this was a marvellous idea, less work for us and a better service to the customer, but my goodness, doesn't the customer have to pay for these changes. The price of some of the products has gone up by almost 50 per cent.

Customers think this is really appalling and I am inclined to agree with them. I have tried to explain that the additional cost has been caused by extra packaging but many just see this as an excuse for higher prices. It has also been difficult to obtain

supplies of these packs for either shop sales or dispensing, so valuable time has been lost chasing suppliers.

Recently I had to visit my own doctor and was given a prescription which I took to my local pharmacy. Having to wait gave me an excuse to look around and my attention was drawn to a notice near the dispensary. It asked customers not to blame pharmacy staff for the new regulations issued by the Department of Health which require customers who are exempt from paying for prescriptions to provide some proof of entitlement when they hand in their prescriptions. If they had any problems with this they were either to contact the Department of Health or their local MP.

I asked the assistant if she had experienced many problems and was told that she had never before suffered so much abuse from the public. Her account was just like listening to my own experiences and those of my colleagues.

I wonder if the Department of Health realises what a stressful and difficult situation they put us in when they forced us to do the job of the DHSS? I'm sure there must be other ways of reducing prescription fraud; if not I will have to ask Santa for a very thick skin to see me through the new millennium. Merry Christmas to everyone.

MEANWHILE...

BY BAM !



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A new way to relieve your customers' cold and flu symptoms.

Research indicates that as many as 57% of your customers would like to use alternative medicines more often but are unsure about what products to use.*

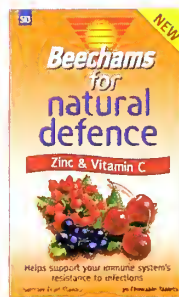
New Beechams for Natural Relief Echinacea and Garlic contains natural ingredients known for their anti-inflammatory and anti-infective properties.

Recommended at the first signs of a cold or flu, Beechams for Natural Relief relieves cold and flu symptoms and helps to speed up the recovery process.

*Source: Mintel, Complimentary Medicines, Market Intelligence, March 1999



A new way to help maintain your customers' immune systems.



When winter viruses attack the body's natural response is to activate its immune system.

So if your customers don't always have a healthy balanced diet, new Beechams for Natural Defence taken daily will help maintain their immune system by supplying them with essential Zinc and Vitamin C.

A massive £1.6 million magazine, press and bus advertising campaign, an integrated consumer PR programme and the benefit of a further £4 million TV spend on the Beechams brand this winter.

Stock up now. Because it's that Beechams time of year again.

Beechams for Natural Relief Echinacea and Garlic. Product Information. Presentation. Yellow sugar coated tablet containing Garlic Powder BHP 330 mg, Echinacea BHP 50mg. Uses. Herbal remedy for the symptomatic relief of colds and flu. Dosage and administration. Adults: 2 tablets 3 times a day with water. Do not chew the tablets. Children: not recommended. Contraindications. Sensitivity to any of the ingredients. Precautions. Do not exceed the stated dose. Pregnancy and lactation. Not recommended. Legal category. GSL. Product licence number. PL 00418/5063. Product licence holder. CPS, William Nadin Way, Swadlincote, Derbyshire, DE11 0BB. Distributed by SmithKline Beecham Consumer Healthcare, Brentford, TW8 9BD, U.K. Package Quantity and RSP 30s £3.99. Date information prepared. July 1999. Beechams, Beechams for Natural Defence and Beechams for Natural Relief are trademarks of SmithKline Beecham.

